



### Change of Contact Information

Student name: \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Student name: \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Student name: \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Student name: \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Name of person completing this form: \_\_\_\_\_

Relationship to student(s): \_\_\_\_\_

**I am requesting a change of (please fill in all applicable sections):**

#### Change of student address:

New student address: (If the student(s) has more than one residence, please list the address where then child(ren) reside(s) more than 50% of the time. )

\_\_\_\_\_

Check if this address change also applies to the student's custodial parent/guardian.

Three pieces of residency/occupancy documentation are required to make a student address change. Documents must be presented at the District Administration Building, 220 Nahatan St., between 8:00 am and 4:00 pm

1. Recent tax bill or deed OR Lease agreements, OR signed and dated purchase and sales agreement.
2. Two other residence documents such as: excise tax, insurance or utility bill (no cell bill)

#### Removal of parent/guardian from the student record:

Parent/guardian name to be removed: \_\_\_\_\_

Please indicate reason for removal:

- Deceased  
 Change in guardianship status.  
 Parent has been denied custody.  
 Other: \_\_\_\_\_

***Please attach any relevant paperwork/legal documents.***

**Change of parent/guardian address**

Parent/Guardian name: \_\_\_\_\_ Custodial / Non-custodial

New address: \_\_\_\_\_

Please indicate the reason(s) for the change:

- Change in parents' relationship status (divorce, separation, remarriage, etc.)
- Change in student's guardianship
- Change in student's custody
- Change in address
  
- Please check here if you are requesting a second parent/guardian Aspen account .

E-mail address for second Aspen account: \_\_\_\_\_

**Parent/Guardian Name Change:**

Parent/Guardian's name as currently in the student record:

\_\_\_\_\_

Please change to the following:

\_\_\_\_\_

Please indicate any other information pertinent to the student record change:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_