



**WATERFORD SCHOOL DISTRICT
CHANGE OF ADDRESS FORM**

Block Code _____

Date: _____

Parent Name: _____
Last First

New Address: _____ City: _____ Zip: _____

New Phone #: _____ Work or Cell Phone #: _____

Child's Name	Current School	New School	Grade	M	F	SE
1. _____				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Old Address: _____ City: _____ Zip: _____

Parent Signature: _____ Date: _____

******MUST BE RETURNED TO THE SCHOOL WITHIN 5 SCHOOL DAYS******

<p>In District moves require 3 new proofs of residency. Required – one of the following:</p> <ul style="list-style-type: none"> ❖ Purchase agreement stating occupancy or closing date ❖ Mortgage or property tax statement ❖ Rental agreement with date of occupancy, names of all occupants, and name and phone number of manager/landlord for verification ❖ Residency Affidavit (if home or apartment is in someone else's name) must go to Pupil Personnel office if this form needs to be completed. Driver's license required as identification for both parties. 	<p>Additional proofs required: two of any of the following;</p> <ul style="list-style-type: none"> ❖ Utility bill – must be one of the two additional proofs ❖ Payroll stub showing address and date ❖ Car insurance bill ❖ Credit card bill ❖ Other as approved by Pupil Personnel office
---	---

*******New Address - Office Use Only*******

Within Current School Boundary, School Name _____
 _____ Proofs Provided
 _____ Emergency Card Updated

Within WSD Boundary/Outside Home School Boundary
 _____ Transferring To New Home School, School Name _____
 _____ School Selection Form Filed To Remain At Current School

Outside District Boundary
 _____ Transferring to new District, Name of District _____
 _____ Resident School of Choice form filed to remain at current school

Student is allowed to remain through the _____ school year.

Bldg. Administrator: _____ Date: _____

Recommendation: Approved Denied:

Comments: _____

Director: _____ Date: _____ Approved: Denied: