

SPRINGFIELD SCHOOL DISTRICT

CHANGE OF ADDRESS / GUARDIAN RECORD ACCESS / NAME FORM

STUDENT ID#	STUDENT NAME (ORIGINAL)	STUDENT NAME (NEW)	GRADE	SCHOOL	SPECIAL ED (Y)

Parent/Guardian Name 1: _____ P/G Name 2: _____

Phone (H): _____ Phone (H): _____

Phone (C): _____ Phone (C): _____

Phone (W): _____ Phone (W): _____

Email: _____ Email: _____

Current / New Address _____

Previous Address _____

***** *Parent/Guardian 2 - If Different* *****

Parent(s)/Guardian(s): _____

Current / New Address _____

Previous Address _____

Phone (H): _____ Phone (C): _____ Phone (W): _____

Email: _____

Notes: _____

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

OFFICE USE ONLY

- RESIDENCY REQUIREMENTS:** Deed, Lease, Mortgage book Utility Bill
- I.D. REQUIREMENTS:** PA Driver's License or PA Photo ID Voter's Registration Pay Stub
- PA Vehicle Registration Bank Statement
- NAME CHANGE I.D. REQ:** Adoption Forms Birth Certificate Court Order/Court Documentation
- Add/Remove:** Multiple Occupancy Intent to Move 1302 Affidavit Foster Placement - Attach required forms
- Educational Access (HAC) Guardian Access (Emergency Contact/Communication)
- Non-Resident Status:** Senior Waiver Tuition Waiver Parent-Paid Tuition DOR Paid Tuition

New School: _____ Previous School: _____

Approved By: _____ Date: _____