

SPRINGFIELD SCHOOL DISTRICT CHANGE OF ADDRESS FORM

STUDENT ID#	STUDENT NAME	GRADE	SCHOOL	SPECIAL ED (√)

New Address _____

Previous Address _____

Parent(s)/Guardian(s) Name 1: _____ P/G Name 2: _____

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

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

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

Email: _____ Email: _____

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

New Address _____

Previous Address _____

Parent(s)/Guardian(s): _____

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

Email: _____

Parent's Signature _____ **Date** _____

OFFICE USE ONLY

- RESIDENCY REQUIREMENTS:** Deed, Lease, Mortgage book Utility Bill
- I.D. REQUIREMENTS (2 OF 5):** PA Driver's License or PA Photo ID Voter's Registration Pay Stub
 PA Vehicle Registration Bank Statement
- Add:** Multiple Occupancy Intent to Move 1302 Affidavit Foster Placement - Attach required forms
- Remove:** Multiple Occupancy Intent to Move 1302 Affidavit Foster Placement - Attach required forms
- Non-Resident Status:** Senior Waiver Tuition Waiver Parent-Paid Tuition DOR Paid Tuition

New School: _____ Previous School: _____

Approved By: _____ **Date:** _____ **Bus Assignment** _____