

SCHUYLKILL VALLEY SCHOOL DISTRICT

Student Change of Address

For office use only

_____ Student Name	_____ DOB	_____ Grade
_____ Student Name	_____ DOB	_____ Grade
_____ Student Name	_____ DOB	_____ Grade
_____ Student Name	_____ DOB	_____ Grade

_____ Student ID #
_____ Student ID #
_____ Student ID #
_____ Student ID #

PARENT NAME: _____

<u>NEW ADDRESS</u>	<u>PREVIOUS ADDRESS</u>
_____	_____
_____	_____

HOME PHONE NUMBER: _____

CELL PHONE NUMBER: _____	FATHER	MOTHER	STUDENT
CELL PHONE NUMBER: _____	FATHER	MOTHER	STUDENT
CELL PHONE NUMBER: _____	FATHER	MOTHER	STUDENT

PROOF OF RESIDENCY

Under the authority of Sections 1301 and 1302 of the Pennsylvania School Code, you are requested to submit **two (2)** or more of the following. These documents will be used to verify the residency of a regular resident, multiple occupancy resident, and custodial resident. This proof of residency must be submitted **before any bus transportation changes can occur.**

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|---|---|
| ___ Agreement of sale or lease | ___ Driver's license |
| ___ Property deed | ___ D.O.T. identification card |
| ___ Voter registration card | ___ Auto insurance card |
| ___ Statement of home owner's insurance | ___ Vehicle registration card |
| ___ Letter from employer (if not self-employed) | ___ Current bill or receipts showing physical address |
| ___ IRS forms or statements | ___ Utility service "turn on" statement |
| ___ Property tax bill or receipt | ___ Notarized district resident statement |
| ___ Bank statement | ___ ACP (Address Confidentiality Program) |
| ___ Court Order | |
| ___ USPS change address form | |

The above checked items have been presented to me as acceptable proof of residence.

_____ <i>Signature of Student Registrar</i>	_____ <i>Date</i>
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