

## ADDRESS/PHONE NUMBER CHANGE FORM

**HCPSS Policy 9000, *Enrollment, Residency, Student Reassignment and Admission to Pre-K and Kindergarten* states that you must provide:**

1. A deed or deed of trust that has all required signatures or an original lease with all required signatures, and
2. Current cable bill, current bill for non-cellular telephone, or current gas and electric bill.

**This documentation must be provided by the parent/guardian to each school that siblings/HCPSS students attend.**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Old Address \_\_\_\_\_ New Address \_\_\_\_\_  
 \_\_\_\_\_

New Phone Number (h) \_\_\_\_\_ (c) \_\_\_\_\_ (w) \_\_\_\_\_

Email Address \_\_\_\_\_

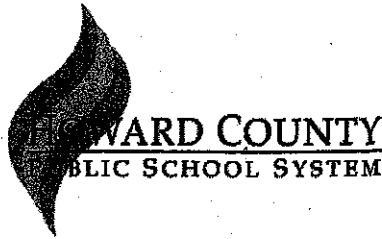
Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Please list siblings/HCPSS students living at this new address:

Student Name \_\_\_\_\_ School Name \_\_\_\_\_  
 Relationship \_\_\_\_\_

Student Name \_\_\_\_\_ School Name \_\_\_\_\_  
 Relationship \_\_\_\_\_

Student Name \_\_\_\_\_ School Name \_\_\_\_\_  
 Relationship \_\_\_\_\_



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Relationship \_\_\_\_\_