

School Use Only	CONTINUING STUDENT ADDRESS CHANGE ◆ 2020-2021	Office Use Only
FREMONT UNION HIGH SCHOOL DISTRICT - ENROLLMENT & RESIDENCY OFFICE 589 St Fremont Avenue · Sunnyvale, CA 94087 · (408) 522-2266		

PART 1 - STUDENT INFORMATION (Please print clearly)

Student's Legal Last Name	Student's Legal First Name	Student's Middle Name	2020-21
<input type="text"/>	<input type="text"/>	<input type="text"/>	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Birth Date (MM/DD/YYYY)	Student Cell Phone	Student E-mail
M or F	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PART 2 – PARENT OR LEGAL GUARDIAN #1 (With Whom The Student Is Residing)

Legal Last Name	Legal First Name	Middle Name	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Birth Date (MM/DD/YYYY)	E-mail Address (please print clearly)	Cell/Mobile Phone
M or F	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address of Home	Apt.	City	ZIP Code (9 digits if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Work Phone (if different from cell phone)	Employer	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Education Level of Parent / Legal Guardian #1 (please check one box below)

- Not a High School Graduate (14)
 High School Graduate (13)
 Some College or AA Degree (12)
- College Degree (11)
 Graduate Degree or higher (10)

PART 3 – PARENT OR LEGAL GUARDIAN #2

Legal Last Name	Legal First Name	Middle Name	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Birth Date (MM/DD/YYYY)	E-mail Address (please print clearly)	Cell/Mobile Phone
M or F	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address of Home	Apt.	City	ZIP Code (9 digits if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Work Phone (if different from cell phone)	Employer	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Education Level of Parent / Legal Guardian #2 (please check one box below)

- Not a High School Graduate (14)
 High School Graduate (13)
 Some College or AA Degree (12)
- College Degree (11)
 Graduate Degree or higher (10)

CONTINUING STUDENT ADDRESS CHANGE FORM ♦ 2020-2021

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PART 4 – WHERE IS YOUR CHILD/FAMILY CURRENTLY LIVING (please check one below)?

- | | | |
|---------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> <u>Temporary</u> Shelter (100) | <input type="checkbox"/> Hotel/Motel (110) | <input type="checkbox"/> <u>Temporarily</u> Sharing a Home (120) |
| <input type="checkbox"/> <u>Temporarily</u> Unsheltered (130) | <input type="checkbox"/> Foster Home (210) | <input type="checkbox"/> Permanent Housing-rent or own (200) |
| <input type="checkbox"/> School Dormitory (230) | <input type="checkbox"/> Health Institution (240) | |

PART 5 – ADDITIONAL HOUSING INFORMATION – this section is optional & you can call our office for more help

Complete this section if you checked any of the Temporary living situations above (Part 4).

Due to financial hardship, our family (or your student) is currently living in:

- | | | |
|------------------------------------------------------------------------------------------------------------------------|----------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> A Campsite | <input type="checkbox"/> An Automobile | <input type="checkbox"/> Abandoned Building (or other unsuitable building) |
| <input type="checkbox"/> Temporarily sharing a home with another family due to not currently having a place of our own | | |

PART 6 – HOUSEHOLD MEMBER INFORMATION - STUDENTS

If there are any additional high school students living in the home that ever attended or will attend a school in the District (FUHSD) in 2020-21, please provide the information below regardless of situation (include siblings, friends and/or other family members):

Student Legal Last Name	Legal First Name	FUHSD School	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Legal Last Name	Legal First Name	FUHSD School	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Legal Last Name	Legal First Name	FUHSD School	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Legal Last Name	Legal First Name	FUHSD School	Relationship
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you share this home with another family? NO YES

If YES, please provide the following information about the head of this family (Father or Mother):

Legal Last Name	Legal First Name	Relationship	Gender M or F
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

PART 7 – MILITARY SERVICE

Is either parent/guardian on active duty in the U.S. Armed Forces (Army, Navy, Airforce, Marine Corps or Coast Guard) or on full-time National Guard Duty? NO YES

PART 8 – SIGNATURES AND DECLARATION

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that the minor student named above lives in my home full-time (or legal shared residency - 50% or more) and I am 18 years of age or older. I understand that if the student is not living full-time within the District's boundaries or if the student's living arrangements do not agree with the information provided on this form, the student will NOT be allowed to attend schools in the Fremont Union HSD.

Parent/Guardian Signature

Date

NOTES (For Office Use Only)