

Avon Middle School North
Student/Parent Change of Address

Student Name: _____

Parent/Guardian Name: _____

New Address: _____

E-mail Address: _____

Home Phone: _____

Siblings/Grade Levels/Schools: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE OF REQUEST: _____

*****Please attach a copy of a utility bill as proof-of-residency for your new address.**

Please return this information to the middle school north guidance office.