



LITTLE EGG HARBOR TWP SCHOOL DISTRICT

307 Frog Pond Road • Little Egg Harbor, NJ 08087
(609) 296-1719 • Fax (609) 296-3225

Patricia Blood
Interim Superintendent of Schools

Robert Green
School Business Administrator/Board Secretary

CHANGE OF ADDRESS FORM

Child(ren)'s Name	Date of Birth	School
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Old Address: _____

Move Effective Date: _____

New Address: _____

To officially change your student's address, you are required to provide **two (2) Proof of Residency documents (1 from each category)**. Documents **must** include the parent/guardian name and new address. If you cannot provide the appropriate documents, are displaced, or are residing with another family, please contact Linda Meehan at 609-296-1719, Ext 1028.

- ❖ You must provide any **ONE** of the following:
 - A Mortgage Statement
 - Property Deed
 - Current lease/rental agreement
 - Current Tax Bill

- ❖ You must also provide any **ONE** of the following:
 - Current Utility statements [gas, electric, cable)
 - Recent Post Office Change of Address Form/Notification

Please return this form along with your two Proof of Residency documents to the Administrative Offices.

 Parent/Guardian Name Parent/Guardian Signature Date

For Official Use Only
 Date Changed: _____ Changed By: _____
 Transportation:
 Bus Number: _____ Bus Stop: _____ Time: _____ By: _____