WESTERVILLE CITY SCHOOL DISTRICT

CHANGE OF ADDRESS FORM

Date Received:_____
(Office Use Only)

In order for this Change of Address to be processed, you must provide:

1. This completed form 2. Your photo I.D.

3. Two (2) proofs of residency AND 4. Residency Affidavit

Date of Move:_____

STUDENT NAME(S) (FIRST AND LAST):	**ID #**	**GRADE**	**CURRENT School**	**Newly Assigned School (based on new address)**

OLD ADDRESS:

_____
(STREET) (CITY) (ZIP)

OFFICE USE ONLY: _____ / _____ / _____
ES MS HS

NEW ADDRESS:

_____
(STREET) (CITY) (ZIP)

LEASE EXPIRATION DATE _____

OFFICE USE ONLY: _____ / _____ / _____
ES MS HS

If the school-of-attendance changes based on the new address and you want to apply for Intra District Open Enrollment (IDOE), you must submit an IDOE request form to idoe@weterville.k12.oh.us (click here)

Do you plan to submit an IDOE request form? Yes ☐ No ☐

***HIGH SCHOOL / MIDDLE SCHOOL OPEN ENROLLMENT DEADLINE = MARCH 15TH FOR NEXT YEAR**
***ELEMENTARY OPEN ENROLLMENT DEADLINE = MAY 1ST FOR NEXT YEAR**

***IF OPEN ENROLLMENT IS APPROVED, TRANSPORTATION IS THE RESPONSIBILITY OF THE PARENT**

Has there been any change in the custodial parents' marital status? **YES** ☐ **NO** ☐

Has there been any change in the custodial parents' living situation? **YES** ☐ **NO** ☐

Other Custodial Parent Address: _____
(IF AT DIFFERENT ADDRESS) (STREET) (CITY) (ZIP)

CUSTODIAL PARENT CONTACT INFORMATION:

_____ (HOME) _____ (CELL) _____ (WORK)

OFFICE USE ONLY

PS _____ DS _____
SS _____ EMAIL _____
COA ___
Ret Mail ___

CUSTODIAL PARENT NAME (PRINT): _____

CUSTODIAL PARENT SIGNATURE: _____

PREFERRED PHONE NUMBER: _____

ITEMS REQUIRED FOR CHANGE OF ADDRESS PROCESSING

1. COMPLETED CHANGE OF ADDRESS FORM

2. PHOTO ID FOR CUSTODIAL PARENT

3. VERIFICATION OF RESIDENCE - TWO (2) PROOFS OF RESIDENCY REQUIRED*

OATH OF RESIDENCY: If the custodial parent is living with a friend or family member who owns a home within the Westerville School District attendance boundaries, that resident must also provide their photo ID and their two (2) required proofs of residency and complete the Oath of Residency form.

If the custodial parent is living with a friend or family member who has a Lease, the custodial parent's name must be on the Lease as a tenant or occupant.

Proof 1 - provide one of the following:

- Current/Active* Rental/Lease Agreement with custodial parent's name listed on the lease (with the option to redact only the financial information);
  If on month-to-month lease, please include that lease and current verification from landlord, including landlord's contact information, on business letterhead

  OR

- Current (*dated within the past 30 days*) Mortgage Statement with custodial parent's name listed. If you have closed on a new home within the last 30 days ~provide a copy of your settlement statement. You may redact financial information;

  OR

- Purchase Contract to buy property (if closing on the sale of the property within 90 days). You may redact financial information;

AND

Proof 2 - provide one of the following:

- Current (dated within the past 30 days) Public Utility Bill, showing service address at a Westerville School District residence, and custodial parent/legal guardian's name (i.e., Gas, Water, Electric, Landline Phone, Cable, or Internet);

  OR

- Current (dated within the past 30 days) Government Mailing, showing a Westerville School District address and custodial parent/legal guardian's name (i.e., child support, government assistance)

4. COMPLETE RESIDENCY AFFIDAVIT ON NEXT PAGE

Send all forms and documents by email to residency-team@westerville.k12.oh.us
or fax to 614-797-7701.

Westerville City Schools Enrollment Center

RESIDENCY AFFIDAVIT

this top section must be completed along with Change of Address Form

Student ID# _____

I, _____, hereby certify that I have established residency,
Parent's Name

seven (7) days a week in the Westerville City School District and I am not maintaining a separate residency elsewhere. I am the parent, guardian, or legal custodian of _____ and I live at:
Student(s) Name(s)

_____

Address Apt # City Zip

This has been my place of residence since _____.

I acknowledge and understand that if the above information is not true and correct, that knowingly swearing or affirming the truth thereof constitutes criminal falsification and is a violation of Ohio Revised Code, Section 23921.13, a first degree misdemeanor, punishable by a maximum fine of $1,000 and/or a maximum term of imprisonment of six months. Further, if the student is found to not be a legal resident, the district will seek remuneration of each day the student illegally attended school in the district. False information may result in the loss of a student's athletic eligibility for one calendar year.

I agree that the Westerville City Schools (WCS), if they deem necessary, have the right to verify my residency. I hereby give my permission for release of information to a representative of WCS pertaining to my residency from rental offices, realtors, and /or utility providers.

_____ _____
Signature of Parent/Guardian **Date**

OATH OF RESIDENCY AFFIDAVIT

****** **ONLY complete this section if living with Relatives/Friends who own home in WCSD** ******

To be completed if the enrolling custodial/residential parent's name is not on the Mortgage Statement of the WCSD address listed

I, _____, do solemnly swear or attest that the person(s)
(Home Owner's Name)

named below live at my address. As the home owner, I have provided a copy of my photo ID, a current mortgage statement, AND a current gas, electric or water bill.

_____
Name(s) of Parent(s) or Guardian

_____
Child(ren) Name(s)

_____
Street Address, City, Zip Code

_____ **As Owner**, I understand that this statement is being made in order to provide proof of residency so that the above named child(ren) may be admitted to the Westerville City School District under this Oath. Persons who knowingly falsify this information are subject to legal action and the child's immediate withdrawal from school.
Owner Initial Here

_____ **As the enrolling parent(s)/guardian**, I, _____, attest that ***I do not live in any other residence*** and that this living arrangement is not solely for the purpose of establishing school attendance eligibility. I understand **I must provide two (2) current proofs of residency at this address in my name within 30 days**; and, that if I should establish my own residence, I will immediately complete a Change of Address form and proofs for the new address.
Parent Initial Here

If you do not provide the necessary documents to close this affidavit, your child(ren) will be immediately withdrawn from the school district

_____ _____
Signature of home owner **Date**

Sworn to and subscribed before me this _____day of _____, 20 _____

_____ _____
Signature of Enrolling Parent **Date**

_____
Notary Signature

***This affidavit is VALID for one (1) school year ONLY**

FORM WC10 / REV 2024