



# Address & Demographic Change Form

- i) Pleasetypeyour responses directly into the form and select from our convenient "drop down" fields to choosepre-populatedanswers. If you choose to print the document and write your responses it must be legible
- ii) You may sign the form electronically
- iii) Email this Address Form, Photo ID and Residency proofs to [student.services@lps53.org](mailto:student.services@lps53.org)

<b>1. Student</b> <i>(first, last)</i>	DOB	Grade
Current School		New School

  

<b>2. Student</b> <i>(first, last)</i>	DOB	Grade
Current School		New School

  

<b>3. Student</b> <i>(first, last)</i>	DOB	Grade
Current School		New School

  

<b>4. Student</b> <i>(first, last)</i>	DOB	Grade
Current School		New School



## SECTION 1 – COMPLETE IF ADDRESS HAS CHANGED

All parents/guardians who have students currently enrolled in Liberty Public Schools, and change residence within the Liberty Public Schools attendance boundaries, will need to report their new residential address to the Student Services Office.

Yes    No

➤ Is your new address a temporary living arrangement?

Yes    No

- *If a temporary living arrangement is it due to loss of housing or economic hardship*

**Former Address** - Please enter the street address, apt #, City, State and Zip

**New Address** - Please enter the street address, apt #, City, State and Zip

The following documents are required to process this address change and must be submitted with this form, failure to submit all required documents will result in delays:

- Photo ID of legal parent/guardian, and
- **Residency Proofs** - dated within the last 60 days and must show the new/service address.  
*Please redact any personal information.*
  - Two different utilities - Water, Gas or Electric only **OR**
  - Lease Agreement - name, lease term, property address and signature page(s)  
(signature of both resident(s) & owner/owners representative) **OR**
  - Non-Contingent home sales contract **OR**
  - Settlement statement from home purchase



## SECTION 2 –CONTACT INFORMATION

1. Name (first and last):	Relationship to student:
Update this parent/guardians address to the students "New"address	
Lives with Student	Preferred Phone
Emergency Contact	Email
Legal Custody	
Allowed to pick Student Up	

1. Name (first and last):	Relationship to student:	Accepts Text
Update this parent/guardians address to the students "New" address		
Lives with Student	Preferred Phone	
Emergency Contact	Email	
Legal Custody		
Allowed to pick Student Up		

AdditionalContacts			Lives With	Emergency Contact	May Pick-Up
Name (first, last)	Phone	Relationship to Student			

I affirm that all information provided on this form is true and correct. I understand and agree that if it is later determined that one or more students enrolled are not legal residents of Liberty Public Schools, District 53 such students will be withdrawn immediately from Liberty Public Schools. I agree that if a student named above does not in fact reside at the address indicated, but is a District resident, the student will be transferred to the appropriate school.

I authorize officials of Liberty Public Schools to contact the persons I have designated as emergency contacts and in the event my designated emergency contacts cannot be reached, school officials are authorized to take whatever action is deemed necessary, in their judgment, for the health and safety of the aforesaid student(s). Expenses, including any incurred as a result of emergency ambulance use or treatment by a physician will not be borne by the District. I affirm that all information provided on this form is true and correct.

**Parent/Legal Guardian Name (please print):**

**Please sign and date the form and submit the form along with "Residency Proofs" to [student.services@lps53.org](mailto:student.services@lps53.org)**

**Parent/Legal Guardian Signature:**

Date:

(electronic signatures accepted)