



STUDENT ADDRESS CHANGE FORM

Complete this form if your student will be moving to a new address

STUDENT NAME: _____ GRADE: _____ BUILDING: _____

EFFECTIVE DATE of ADDRESS CHANGE: _____

Current Address: _____

NEW Physical Address for student: STREET: _____

CITY: _____ STATE: _____ ZIP: _____

Is this address a temporary living arrangement? The answer to this question helps determine the services the student may be eligible to receive. YES ☐ NO ☐

Is this temporary living arrangement due to loss of housing or economic hardship? YES ☐ NO ☐

Who will be living at the address? Please list the names of all individuals that will reside at this address:

Did the entire family move? (for census purposes only) YES ☐ NO ☐

Do you want to change the mailing address for the student? ☐ Same as new address indicated above

New Mailing Address: STREET: _____

CITY: _____ STATE: _____ ZIP: _____

Proof of Residency Documents can be emailed along with this form OR brought to your student's school to be copied. Acceptable Documents – choose one from each column:

☐ Rental/Lease Agreement (Signed within last year)	☐ Tax Bill dated within 30 days
☐ Mortgage Agreement/Invoice	☐ Water/Sewer Bill dated within 30 days
☐ Real Estate Tax Bill from current year	☐ Gas/Electric/Cable Bill dated within 30 days
☐ Not the homeowner nor leaseholder	☐ Other invoice dated within 30 days

If YOU ARE NOT the homeowner nor leaseholder, you will need to complete a Multiple Occupancy Form at the District Office. The homeowner or leaseholder MUST come with you to the District Office to sign the Multiple Occupancy Form and be notarized by our student registrar.

Apply this address change to the following students at CV: NAME/GRADE: _____

By adding your name below, you are confirming the above information is accurate.

Name: _____ Contact Phone Number: _____ Date: _____

Address Updates will not appear in the Parent Portal until CV Staff have reviewed your submission. Elementary students may be required to change buildings based on their new address. More information will be shared after this form is reviewed.

ADMIN USE ONLY: Building Change Required? New building: _____ Effective date: _____