

## CHANGE OF ADDRESS / PHONE NUMBER FORM

Date \_\_\_\_\_

Student Name \_\_\_\_\_ Student # \_\_\_\_\_ Grade \_\_\_\_\_

Previous Address \_\_\_\_\_ Zip Code \_\_\_\_\_

New Address \_\_\_\_\_ Zip Code \_\_\_\_\_

\*\*Proof of Address includes Lease or Mortgage and /or JEA statement \*\*

New Phone Number \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

**\*\*New numbers will be VERIFIED before changes are made\*\***

Print Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

Office Use Only

Date Received \_\_\_\_\_ Date of Change \_\_\_\_\_ Verify \_\_\_\_\_

CRT \_\_\_\_\_