

# Change of Address Form



Green Bay Area  
Public School District

Secondary Address *(check box)*

***Provide proof of the new address with a lease, mortgage, or current utility bill (gas/water/electric only)***

NEW Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Primary Household Phone: \_\_\_\_\_ Effective/Move Date: \_\_\_\_\_

OLD Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

**List Parent/Guardians (adults) moving to the new address (Attach list if more space needed):**

Name

Relationship to student


**List ALL students moving to the new address (New enrollment forms are NOT needed if changing schools)**

Student Name

Date of Birth

Schools Attending

(Currently)

(After Move-Start Date)

(Next School Year)

<u>Student Name</u>	<u>Date of Birth</u>	(Currently)	(After Move- <u>Start Date</u> )	(Next School Year)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Notes:**

- If you choose to remain at a non-attendance area school(s), this may be revoked for habitual truancy and/or behavior.
- Transportation to the non-attendance area school(s) is the responsibility of the parent/guardian.

\_\_\_\_\_  
*Parent/Guardian Signature*

\_\_\_\_\_  
*Date*

**For School Office Use Only:**

New Home Attendance Area: (Elem) \_\_\_\_\_ (Middle) \_\_\_\_\_ (High) \_\_\_\_\_

Address verified by: \_\_\_\_\_ / \_\_\_\_\_ Document used: \_\_\_\_\_ Date: \_\_\_\_\_

(Initials/School)

Out of Home Placement:  Yes  No

(Revised 02/02/2021)