WATERFORD-HALFMOON UNION FREE SCHOOL DISTRICT

Received By: \_\_\_\_\_

## **CHANGE OF ADDRESS FORM**

If you have moved or are moving from one home to another in the Waterford-Halfmoon School District, you must fill out this form and return it to the District Registration Office. Two (2) copies of Proof of Residency are required along with this form. Proof of Residency must display your name and new address.

Acceptable Proofs of Residency include: current utility bill, updated driver's license or state issued identification card, rental/lease agreement, home deed or closing papers, auto insurance, or a notarized letter from your landlord. If you have any questions regarding what documents qualify as valid Proof of Residency, please call the Registrar's Office at (518) 237-0800 x3710.

Submit this form and Proofs of Residency to the District Registration Office at 125 Middletown Road, Waterford, NY 12188 in person, by US Mail, email at <u>kmulligan@whufsd.org</u>, or fax. **This form and proofs are required to change your student's bus assignment.** Once the form is received by District Registration, please allow 3-5 days for processing.

TO BE COMPLETED BY PARENT/GUARDIAN (PLEASE PRINT)			
Effe	ctive date of move: / / /		
New Address:	City/State/Zip:		
Updated Phones:	(H)	(W)	(Cell)
Mailing Address (if different):	City/State/Zip	:	
Please list ALL occupants, adults and chi	ildren, living at this address (include sch	nool and grade of studer	nts):
Name:	Relationship:	School:	Grade:
Name:	Relationship:	School:	Grade:
Name:	Relationship:	School:	Grade:
Name:	Relationship:	School:	Grade:
Name:	Relationship:	School:	Grade:
	FOR DEPARTMENT USE ONLY		
Date Stamp Here Transportation:	Date: / /		
Registrar: Date:	//		