CHANGE OF ADDRESS

To officially change your student's address, you are required to provide TWO address verification documents, dated within the last 60 days. You must do this even if you have notified your child's school of the new address. Acceptable documents are listed below. No envelopes, advertising or correspondence accepted.

Last Name of Student First Name Student ID or Birth Date	Seattle City Light Bill Cable Bill Insurance Document	Please check the do PSE Bill Internet Bill DSHS Document	Other U	Jtility Bill e Telephone Bi	Lea	se/Mortgage Docu	ument	
New Street Address			Move	Effective D	ate:			
Email Address Home Phone No. Cell Phone No. PARENT/GUARDIAN SIGNATURE PLEASE PRINT NAME DATE Additional children attending Seattle Public Schools that live at this new address. Write clearly. Last Name First Name Student ID/Birth Date Last Name First Name Student ID/Birth Date	Last Name of Student		First Name			Student ID or	Birth Date	
PARENT/GUARDIAN SIGNATURE PLEASE PRINT NAME DATE Additional children attending Seattle Public Schools that live at this new address. Write clearly. Last Name First Name Student ID/Birth Date	New Street Address		Unit No.	City		State	Zip Code	
Additional children attending Seattle Public Schools that live at this new address. Write clearly. Last Name First Name Student ID/Birth Date	Email Address				Home Phone No.	Ce	Il Phone No.	
Last Name First Name Student ID/Birth Date Last Name First Name Student ID/Birth Date Last Name First Name Student ID/Birth Date Email/Fax/Mail or Bring Your Information To:								
Last Name First Name Student ID/Birth Date Last Name First Name Student ID/Birth Date Email/Fax/Mail or Bring Your Information To:	Last Name		First Name			Student ID/Bir	rth Date	
Last Name First Name Student ID/Birth Date Email/Fax/Mail or Bring Your Information To:	Last Name		First Name			Student ID/Bi	Student ID/Birth Date	
Email/Fax/Mail or Bring Your Information To:	Last Name		First Name		Student ID/Bi	Student ID/Birth Date		
	Last Name		First Name		Student ID/Bi	Student ID/Birth Date		
	Email Address: admiss		ax/Mail or	<u> </u>			0761	

Mailing Address Seattle Public Schools Telephone: (206) 252-0760

John Stanford Center Service Center Street Address: $2445 - 3^{rd}$ Avenue South PO Box 34165 Seattle, WA 98134 Mail Stop 11-174

(3rd & Lander) Seattle, WA 98124-1165

Pursuant to Board Policy 3119, falsification of an address or residence (or conditions of living arrangement) to obtain a school assignment will be cause for the revocation of the student's school assignment and return to the proper school of assignment.