



# Student Change of Information

*Instructions: To be completed by parents only.  
Please complete any information that has changed since you last submitted it to us.*

Name of parent completing form: \_\_\_\_\_  
(First name) (Last name)

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_  
(First name) (Last name)

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_  
(First name) (Last name)

Student's Name: \_\_\_\_\_ Grade \_\_\_\_\_  
(First name) (Last name)

New Address: \_\_\_\_\_  
Number and Street Name Apt. #  
\_\_\_\_\_  
City State Zip

New **home** phone(s): Father: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mother: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

New **work** phone(s): Father: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mother: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

New **cell** phone(s): Father: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mother: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail address: Father: \_\_\_\_\_

Mother: \_\_\_\_\_

**For GIS parents only:** Be sure to update your child (ren)'s emergency form, if necessary.

Do you also have children on the waiting list?  Yes  No

\_\_\_\_\_  
Signature Date

**For Office Use Only**

Family ID: \_\_\_\_\_

Distribution and posting:

- Office Specialist for  student db  sis  
 Business Mgr. for  donor db

- Front Office Emergency Binder  
 PK Emergency Binder  
 Emergency Shed