**Change of Address - To Be Completed By Parent/Guardian**

Please complete this form when a student’s residence address is changed.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Legal Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last

Current Grade Level:\_\_\_\_\_\_\_\_\_\_\_\_ Current School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New Residence Address: *Please attach proof of residence.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Parent Name (Printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete one of the sections below.**

|  |
| --- |
| \_\_\_\_\_\_ This address continues to be in the student’s current school’s attendance area. The student  will continue to attend his/her current school. *Please submit this form and proof of residence*  *to your school office.* |
| \_\_\_\_\_\_ This address is in a different attendance area than the student’s current school.  *Please check*  *one of the items below and submit to the District Office.*  \_\_\_\_\_\_ We would like the student to attend the school that serves our new residence.  School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_ We would like to apply for choice for the student to attend a school other than the  school that serves our new residence.   * If new residence is within Eastmont School District, Please complete and attach the “Choice Transfer Request” and submit to the Eastmont Administration Office. 800 Eastmont Avenue, East Wenatchee, WA 98802 * If new residence is outside of Eastmont School District, please complete a Choice Transfer Request at the school district of your residence.   \_\_\_\_\_\_ We are currently in transitional housing. Please contact our District Transitional  Housing Liaison, Nan Cuevas 888-4735. |

**Cambio de Domicilio - Padre/Guardián Debe Completar**

Por favor complete esta forma cuando el domicilio de residencia del estudiante cambie.

Fecha:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ # de Teléfono:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre Legal del Estudiante:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primer Segundo Apellido

Grado Actual:\_\_\_\_\_\_\_\_\_\_\_\_ Escuela Actual:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nuevo Domicilio de Residencia: *Por favor agregue prueba de residencia.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ciudad Estado Codigo Postal

Nombre del Padre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Firma:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Por favor complete una de las secciones siguientes.**

|  |
| --- |
| \_\_\_\_\_\_ Este domicilio continua en el área de asistencia del estudiante. El estudiante continuará  su asistencia en su escuela actual.  *Por favor entregue esta forma y su prueba de residencia a al oficina de su escuela.* |
| \_\_\_\_\_\_ Este domicilio está en una área de asistencia diferente a la escuela actual del estudiante.  *Por favor indique una de las respuestas siguientes y entregue a la Oficina del Distrito.*  \_\_\_\_\_\_ Nos gustaría que el estudiante asista a la escuela de nuestra nueva residencia.  Nombre de Escuela:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_ Nos gustaría aplicar para choice para que el estudiante asista a otra escuela  Que no está en nuestra nueva residencia.   * Si su nueva residencia está dentro del Distrito Escolar de Eastmont, por favor complete y agregue la forma “Solicitud de Elección- Choice” y entregue a la Oficina Administrativa de Eastmont. 800 Eastmont Avenue, East Wenatchee, WA 98802 * Si su nueva residencia está fuera del Distrito Escolar de Eastmont, complete la Forma de Elección Choice y entregarla en el distrito escolar de su nueva residencia.   \_\_\_\_\_\_ Actualmente estamos en alojamiento temporal. Por favor contacte a nuestra  Coordinadora de Familias en Alojamiento Temporal, Nan Cuevas al 888-4735. |