# St. Johns County School District

## Student Change of Address Form

Last Modified 1/19/2018

Please complete this form and submit to your child's school along with valid proofs of residency for your new address.

**The following two documents are required and must be dated within 30 days:**

☐ Mortgage Statement / Property Deed /HUD **OR** Lease / Rental Agreement with Exp. Date
☐ Utility Bill (electric, water or cable) (student names must be listed)

**and if applicable:** ☐ Homeowner's Acknowledgment of Residency

**along with one of the following documents, dated within 30 days:**

☐ Additional Utility Bill
☐ Property Tax Record
☐ Telephone/ Cellular Statement
☐ Homeowners / Renters Insurance Documents
☐ Other: _____

☐ Bank Statement / Paycheck Stub
☐ Vehicle Registration
☐ Credit Card Statement
☐ Medical Insurance Statement

Parent/Legal Guardian: _____ Phone #: _____ Valid Photo ID: ☐

Old Address: _____

New Address: _____ Effective Date: _____

Student lives with: ☐ Both Parents ☐ Mother ☐ Father ☐ Parent & Step-Parent
☐ Legal Guardian (relationship: _____)

Please fill out this form once per address change, listing all students who reside in your household and attend SJCSD schools. For your convenience, all students who are linked together and reside in your household will be updated with the new address.

| Last Name | First Name | Birthdate | Current School of Enrollment | Grade |
|---|---|---|---|---|
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I affirm that all information given above is true and correct. To remain at current school of enrollment, please visit https://www.stjohns.k12.fl.us/schoolservices/transfers/. I understand that I have three days to complete the Out of Zone transfer request.

Parent/Guardian Signature: _____ Date: _____

**For school use only:**

Received by: _____ Position: _____ School: _____ Date entered: _____

☐ Intake school, please copy this sheet and forward to any school for students listed above.