



## Address Change form Charter/Non-Public Schools

Primary Residential Parent/Guardian Name (This is the primary residential parent/guardian for the student(s) listed).

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_

Parent Contact Phone \_\_\_\_\_

Parent Email \_\_\_\_\_

Has custody  Yes  No

Old Address \_\_\_\_\_ Zip Code \_\_\_\_\_

New Address \_\_\_\_\_ Apt \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent Signature \_\_\_\_\_

### Information in the box below will be completed by the Charter/Non-Public School

Please review proof of address information from parent/guardian to assure it is within the enrollment boundaries for Columbus City Schools before submitting this application.

I have received and verified student address information. To the best of my knowledge all information provided on this form is accurate:

Designated Charter/Non-Public School official signature \_\_\_\_\_

Please Print Name \_\_\_\_\_

Contact Phone \_\_\_\_\_

#### Checklist/Office Use Only

- Proof of Residency
- Parent/Guardian ID
- Custody Papers (If Applicable)

Please Note: Applications with incomplete information will be returned to the school for completion. This could result in a delay in processing.



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Use this form to submit a request for transportation to a new address. This form must be verified, signed, and submitted to CCS transportation from a designated Charter/Non-Public school official. Complete one form per family, but be sure to submit documentation of address change to each school you have children attending. CCSID is your student identifier for our database. Your school should be able to help you with this.

### Child 1

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_

### Child 2

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_

### Child 3

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_

### Child 4

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_

### Child 5

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_

### Child 6

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ DOB \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_ CCSID \_\_\_\_\_