

Monroe Township Public Schools

STUDENT CHANGE OF ADDRESS

Today's Date: _____

Effective Date: _____

Name of Student: _____

Student Number: _____

Student Grade: _____

Previous Address: _____

Previous Home
Phone Number: _____

Previous
School: _____

New Address: _____

New Home
Phone Number: _____

New
School: _____

Proof of Residency: _____

Please list the names of all current household members: _____

Parent/Guardian Signature: _____

Address updated in Powerschool by: _____

Distribution:

Registration

School

Special Services/Child Study Team