

FAMILY MOVE NOTIFICATION

When a family move occurs from one Pulaski Community School District attendance area to another Pulaski Community School District attendance area and the parents would like to request that the student(s) remain at their original school **for the current school year**, notify your school office about your address change and then complete this form and send it to:

Pulaski Community School District
District Office
P.O. Box 36
Pulaski, WI 54162

(an In-District Elementary Transfer form must be filled out in February and approved for any following years)

We have moved!

PLEASE PRINT

Old Address _____

Old Telephone _____

New Address _____

New Telephone _____

Parent Name _____

_____ is/are presently a student at
Student Name(s)

_____ and are requesting to remain there for the remainder of the
Name of School

school year even though we have moved to the _____ Pulaski Community
Name of School

School District attendance area. We understand that we need to fill out an In-District Elementary Transfer Form for any following years.

Parent Signature

Date of Move