

Alder Grove Charter School
Information Change Form

Date: _____

Student Last Name: _____ Student First Name: _____

Phone and Address Changes / Additions

MOTHER **Receives mail for student:** **Yes / No** **Lives with Student: Yes / No**

Name: _____

Physical Address: _____

Mailing Address: _____

Type of Residence: Permanent Single Family Residence Doubled-up / Shared Housing Shelter / Hotel Campsite/Other

Home phone: _____ Preferred Phone: _____

FATHER **Receives mail for student:** **Yes / No** **Lives with Student: Yes / No**

Name: _____

Physical Address: _____

Mailing Address: _____

Type of Residence: Permanent Single Family Residence Doubled-up / Shared Housing Shelter / Hotel Campsite/Other

Home phone: _____ Preferred Phone: _____

GUARDIAN **Receives mail for student:** **Yes / No** **Lives with Student: Yes / No**

Name: _____

Physical Address: _____

Mailing Address: _____

Type of Residence: Permanent Single Family Residence Doubled-up / Shared Housing Shelter / Hotel Campsite/Other

Home phone: _____ Preferred Phone: _____

Name Change (copy of legal documentation required)

Current Student Name: _____

New Student Name: _____

Teacher or Grade Level Change

Current Grade Level: _____ New Grade Level: _____

Current CT: _____ New CT: _____ Effective Date: _____

Admin. Signature: _____ (CT changes only)