

CHANGE OF ADDRESS

Educational Placement Center * San Francisco Unified School District * 555 Franklin Street, Room 100 * San Francisco, CA 94102 * (415) 241-6085

This form must be submitted in person by the parent/guardian to the Educational Placement Center with a photo ID and one proof of address.

1. Student Last Name _____ First Name _____ Birthdate _____ Grade _____ School _____ Student ID Number _____

2. Student Last Name _____ First Name _____ Birthdate _____ Grade _____ School _____ Student ID Number _____

3. Student Last Name _____ First Name _____ Birthdate _____ Grade _____ School _____ Student ID Number _____

Old Address:

Number _____ Street Name _____ Street Type _____ Apt # _____ City _____ Zip Code _____

New Address:

Number _____ Street Name _____ Street Type _____ Apt # _____ City _____ Zip Code _____

1st Parent/Guardian:

Last Name _____ First Name _____ Phone: Primary Cell Landline _____ Secondary Cell Landline _____

2nd Parent/Guardian:

Last Name _____ First Name _____ Phone: Primary Cell Landline _____ Secondary Cell Landline _____

Please complete this section if both parents do not live at same address.

Secondary Address:

Number _____ Street Name _____ Street Type _____ Apt # _____ City _____ Zip Code _____

Name of Parent at this address:

Last Name _____ First Name _____

Note: Change of Address does not guarantee a new assignment. New assignments will be made based on space availability.

I want my child(ren) to **remain** at the current school(s).

I want my child(ren) to be **reassigned now**. You must complete an **Enrollment Application for each child**.

Address Verification - Original Documentation Required

Parent/Guardian must provide a picture ID and one (1) proof of home address that includes the name and address of the Parent/Guardian. Any one of the following documents is acceptable:

- Utility service contract, statement or payment receipts; from different agencies such as PG&E, water, cable, or garbage within 45 days (no cell phone bills will be accepted)
- Both automobile registration and auto insurance policy (declarations page), must be current (count as one proof)
- Homeowner's or renter's insurance policy, must be current
- Property tax payment receipts, must be current assessment year.
- Correspondence from a government agency within 45 days
- Grant deed, title of property
- Rental property contract, lease, or payment receipts within 45 days
- Section 8 agreements, must be current
- Affidavit of residency executed by the parent or legal guardian of a pupil
- Pay stubs, within 45 days
- Voter registration, must be current

I (print name) _____, swear under penalty of perjury that the information I have provided in this application is true. I understand that I am required to notify the District of any subsequent change of address within 14 calendar days of the move. I understand that applications which are found to have a fraudulent address or other false information will be immediately cancelled and any resulting assignment retracted. A notation of any falsified information may be included in the student's permanent record file. I understand that if the District must hire an investigator or expend other resources in order to scrutinize my residency claim further, the District will charge me for these expenses if it ultimately determines my claim is false. I understand that the District also reserves the right to seek additional civil and/or criminal legal remedies against families that submit fraudulent information.

Parent/Guardian Signature _____ Date _____

OFFICE USE ONLY

Submitted at/Taken by _____	Date _____	Proof of Address _____	Entered by _____	Date _____
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