# 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

<table>
<thead>
<tr>
<th>Old Address</th>
<th>New Address</th>
<th>1st Parent/Guardian</th>
<th>2nd Parent/Guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Number</td>
<td>Last Name</td>
<td>Last Name</td>
</tr>
<tr>
<td>Street Name</td>
<td>Street Name</td>
<td>First Name</td>
<td>First Name</td>
</tr>
<tr>
<td>Street Type</td>
<td>Street Type</td>
<td>Phone: Primary</td>
<td>Phone: Primary</td>
</tr>
<tr>
<td>Apt #</td>
<td>Apt #</td>
<td>□ Cell □ Landline</td>
<td>□ Cell □ Landline</td>
</tr>
<tr>
<td>City</td>
<td>City</td>
<td>Secondary □ Cell □ Landline</td>
<td></td>
</tr>
<tr>
<td>Zip Code</td>
<td>Zip Code</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Secondary Address</th>
<th>Name of Parent at this address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number</td>
<td>Last Name</td>
</tr>
<tr>
<td>Street Name</td>
<td>First Name</td>
</tr>
<tr>
<td>Street Type</td>
<td></td>
</tr>
<tr>
<td>Apt #</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>Zip Code</td>
<td></td>
</tr>
</tbody>
</table>

**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
- 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**
Submit at Taken by Date Proof of Address Entered by Date

**White:** EPC attach ONE PROOF of ADDRESS  **Yellow:** Assigned School  **Pink:** Parent Copy