



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 555 Franklin Street, Room 100. You must submit a separate form for each child.

Student name: _____
Last First Middle Birthdate Gender

Old Address: _____
Street Apartment # Zip

New Address: _____
Street Apartment # Zip Cross Street:

New Home Phone Number: _____

Parent/Guardian: _____
Last First Middle Work Phone Number

2nd Parent/Guardian: _____
Last First Middle Work Phone Number

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

Secondary Address: _____
Street Apartment # Zip City

Name of Parent at this address: _____
Last First Middle Home Phone Number

School Currently Attending: _____ Current Grade: _____

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

I want my child to **remain** at the current school.

I want my child to be reassigned **now**. You must complete an Enrollment Application.

Address Verification - Original Documentation Required

Parent/Guardian must provide picture ID and two (2) current proofs of your home address with the name & address of the parent/guardian on record. The proofs must be dated & current within forty-five (45) days.

Any two of the following original documents are acceptable:

- One One to two utility bills from different agencies such as PG&E, water, cable, or garbage. **No cell phone bills will be accepted.**
- Both automobile registration and auto insurance policy (Count as (1) one Proof)
- Homeowner's or renters insurance policy
- Property tax statement
- Official letter from a social service/government agency
- Grant deed, Title of property or rental/lease agreement with property owner's documentation
- Section 8 agreements

I (print name) _____, swear under penalty of perjury that the information I have provided in this application is true. (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. Keep in mind that if the District must hire an investigator or expend other resources in order to scrutinize your residency claim further, the District will charge you for these expenses if it ultimately determines your claim is invalid. 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 # 1	Proof of Address # 2	Enrollment Application Submitted Y/N	Assigned School	HO #	Entered by	Date

White: EPC attach TWO PROOFS of ADDRESS Yellow: Assigned School Pink: Parent Copy