

# Laurens County School District

## 2022-2023 Student Change of Address Request

**If the change of address requires change of school, the parent/guardian MUST go to the Centralized Registration Office to complete the In-District Transfer Request.**

**Parent/Guardian's Picture ID is REQUIRED**

### List Information for All Students the Address Change will Apply

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_  
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**You MUST provide (1) one item listed below to verify Proof of Residence. Please check which document you will provide as proof of residence. Document MUST be dated within 30 days**

\_\_\_\_\_ Mortgage Statement  
\_\_\_\_\_ Lease Agreement  
\_\_\_\_\_ Utility Bill or Request for Service (electricity, water, or gas statement ONLY)  
\_\_\_\_\_ Current Property Tax Statement

**Is your family moving in with someone else?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

*If yes, please complete a Notarized Verification of Address Form along with proof of residence*

**OLD** Street Address: \_\_\_\_\_  
\_\_\_\_\_

**NEW** Street Address: \_\_\_\_\_  
\_\_\_\_\_

Home Telephone #: \_\_\_\_\_

Parent's Name (MOM): \_\_\_\_\_

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Parent's Name (DAD): \_\_\_\_\_

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian's Name (please print)

\_\_\_\_\_  
Parent/Gaurdian's Signature

### FOR OFFICE USE ONLY

Acceptance Date: \_\_\_\_\_ Accepted by: \_\_\_\_\_  
Date Changed: \_\_\_\_\_ Changed by: \_\_\_\_\_