

Conrad Weiser Area School District  
**ADDRESS/INFORMATION CHANGE REQUEST**

Please complete and submit this form to  
Conrad Weiser Area School District  
44 Big Spring Road  
Robesonia, PA 19551

Student \_\_\_\_\_ Building \_\_\_\_\_ Grade \_\_\_\_\_  
(Last) (First)  
Student \_\_\_\_\_ Building \_\_\_\_\_ Grade \_\_\_\_\_  
(Last) (First)  
Student \_\_\_\_\_ Building \_\_\_\_\_ Grade \_\_\_\_\_  
(Last) (First)

Previous Home Address \_\_\_\_\_  
Street Address City Zip Code

NEW ADDRESS \_\_\_\_\_  
Street Address City Zip Code

Parent's Name \_\_\_\_\_

Phone # (Home) Phone # (Work) Phone # (Cell)

E-mail \_\_\_\_\_

Starting date \_\_\_\_\_

**PLEASE NOTE ANY CHANGE OF ADDRESS WILL REQUIRE TWO PROOF OF RESIDENCY AT NEW ADDRESS.**  
**Proof of Residency can be a copy of a utility bill, lease, bank statement, etc**

I understand that address changes cannot be made without the proof of residency. In addition, any change in transportation will require a minimum of two days notice to transportation and a transportation request form completed and submitted to transportation.

Parent/Guardian Name \_\_\_\_\_ (print)

Parent Signature/Guardian \_\_\_\_\_ Date \_\_\_\_\_

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CHANGE OF INFORMATION NOTICE  
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Office use only:

Date received \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Action Taken:

- Approved Proof of Residency Attached
- Denied
- Further Information needed \_\_\_\_\_
- Parent Contacted Date \_\_\_\_\_ Initial \_\_\_\_\_