Lindenwold Public Schools District

Request for Change of Address Form

I,Parent/Legal Gua	ardian's name	, am requesting a change of address for m	ny child(ren), attending Lindenwold Schools
Student Na	ame #1	Student Name #2	Student Name #3
OLD ADDRESS:			
	(Number & St	reet)	(Apt. #)
	(City)	(State)	(Zip Code)
*NEW ADDRESS:	(Number & Str	reet)	(Apt. #)
	(City)	(State)	(Zip Code)
PHONE NUMBER: _			
EMAIL:			
with parent/guardian's parent/	The control of Lindenwer of Lin	signature of parent/legal of arent/guardian ID and 3 <u>current</u> proofs of al/Lease Agreement or Mortgage/Tax Billy Bills within the last 30 days (electric, ga	f residency (1 Primary and 2 secondary) l/Settlement Papers
·		STAFF ONLY	
PARENT PRESENTEI Valid Lease/Rental Current Mortgage S Tax Bill Deed Residency Affidavi	Agreement	Utility/Mail #1 Utility/Mail #2 License/ID Card (with current addr Address changed in Real Time	Please check if transportation needs updating. Forwarded to Liz Iuliucci MKV Intake:

LINDENWOLD PUBLIC SCHOOL DISTRICT Student Enrollment Residency Questionnaire/Verification

Student's Name:
In accordance with New Jersey State law (NJSA 18A:38-1 and 18A:7B-12), it is necessary to determine the residence of students entering the school district.
Please indicate which situation best describes the student's CURRENT residence:
1. Student lives with parent/guardian in their own home or apartment (rent or own). (For #1; also please complete next page Residency Information: PERMANENT)
2. Student was placed in a Foster Home or Treatment/Group Home by DCP&P or a similar agency.
Caseworker:Phone Number:
(For #2; also please complete next page Residency Information: PERMANENT)
 Student lives with parent/guardian/self in a family member's or friend's home due to economic hardship or family crisis situation. (For #3; also please complete Residency Information: McKinney Vento Homeless Assistance Act & Residency Affidavit*)
4. Student lives with parent/guardian/self in a family member's or friend's home by choice. (For #4; also please complete the Residency Affidavit*)
5. Student is an unaccompanied child or youth who meets the definition of the McKinney Vento Act and is not in the physical custody of a parent or guardian. (For #5; also please complete Residency Information: McKinney Vento Homeless Assistance Act & Residency Affidavit*)
Parent/Guardian Signature: Date:

• Note: Immigration/visa status shall not affect eligibility to attend school. Any student who is domiciled in the school district or otherwise eligible to attend school there pursuant to N.J.A.C. 6A:22-3.2 shall be enrolled without regard to, or inquiry concerning, immigration status.

LINDENWOLD PUBLIC SCHOOL DISTRICT

Residency Information: PERMANENT

ent Name:			Date:			
	swear under oath that the following is true:					
1.	On	, I moved into the Boro	ugh of Lindenwold, in the State of New Jersey.			
2.	My address is: and I will be residing here on a permanent basis with the above-mentioned student.					
3.	I am the mother father legal guardian of the Student listed above and he/she live with me at the address listed in Statement 2.					
4.	I am not the mother; father; and /or legal guardian but this student is living with me because					
5.		my current property tax b	ngement. I am providing the Lindenwold Board of ill, mortgage papers, or rental/lease agreement or from the list below:			
		_	rd with correct name and address			
			of court or agency placements			
Ms. Abl	by Ramirez, Central Registr	rar, at (856) 784-4071 exto	reliminary Information sheet or contact ension 3126 to inquire.			
-	answer the following que		is, regulaless of which parent has castody,			
6.	attendance, and if so, wh	nere does it require the s	veen the parents designating the district for schootstudent to attend school? (You will be asked to			
7.			entire year? If so, with which parent and at what			
	If not, for what portion of	of time does the student	reside with each parent and at what addresses?			
	DIANPrint You	r Name	Signature			
F*******			**************************************			
	Print Name (Witness)		Signature of Witness			

LINDENWOLD PUBLIC SCHOOL DISTRICT

Residency Information: McKINNEY VENTO HOMELESS ASSISTANCE ACT

		Date:
	, swear u	nder oath that the following is true:
economic hardship o	r similar reason, I am	e Borough of Lindenwold due to a loss of housing, currently unable to provide a permanent residence the home of
whose address is:		
		$_$ legal guardian of the Student listed above and he/she liv #1.
My previous address	was:	
The Student listed ab	ove was	was not enrolled in school prior to moving to Lindenwold
Name of previous sch	nool:	
Print You		Signature
•	arate Residency Affida	avit to be completed by the parent/legal guardian and o
olu property.		
******	*******	************
sed on this	day of	, 20
Print Name (Witr		Signature of Witness
	Oneconomic hardship o of my own and I am to whose address is: I am the moth with me at the address My previous address and I moved from this The Student listed above Name of previous schools address of previous schools previous schools previous schools are previous schools as a separate of property.	economic hardship or similar reason, I am of my own and I am temporarily staying in whose address is: I am the mother father with me at the address listed in Statement My previous address was: and I moved from this address because was The Student listed above was Name of previous school: Address of previous school: Print Your Name sked to submit a separate Residency Affidatold property.

LINDENWOLD PUBLIC SCHOOL DISTRICT (Distrito Escolar Público de Lindenwold) RESIDENCY AFFIDAVIT (Declaración Jurada de Residencia)

,		rrently residing at the following	
Lindenwold Resident (Yo, residente de Lin	denwold) (,es	(,estoy residiendo en la siguiente	
address:			
dirección:)			
The following people currently reside with me (las siguie	ntes personas actu	almente residen conmigo):	
Parent/Legal Guardian (padre/madre/tutor legal)	Parent/Legal Guar	dian (padre/madre/tutor legal)	
Student Name (nombre de estudiante)	Student Name (no	mbre de estudiante)	
Student Name (nombre de estudiante)	Student Name (nombre de estudiante)		
**In order to meet the guidelines for registration in this omy address which is listed above. (A fin de cumplir con adjuntado copias de documentos que verifican mi direccion	los requisitos para	la inscripción en este distrito,	
Lindenwold Resident's Signature		Date	
(Firma de residente de Lindenwold)		(Fecha)	
Parent(s)/Legal Guardian's Signature		Date	
(Firma de padre/madre/tutor legal)		(Fecha)	
The above individuals appeared before me on this the		, 20	
(Los individuos arriba mencionados comparecieron ante mí el)			
	Notary Public (Notario Público)		

^{**}Please return this form along with <u>Lindenwold Resident's</u> current Rental/Lease Agreement, tax bill or mortgage statement **AND** 2 additional proofs of residency such as recent utility bill, bank statement, county ID, cell phone bill, etc. (Favor devolver este formato junto con el contrato de alquiler/arrendamiento actual, factura de impuestos o estado de cuenta hipotecario <u>del residente de Lindenwold</u> **Y** 2 pruebas adicionales de residencia reciente como recibo de servicios, estado de cuenta bancario, identificación del condado, cuenta de teléfono celular, etc.)