

Charter School Student Change of Address Form

For School Year **2011-2012**

Name of Charter School:		Propel ■ Homestead	
Address:		129 East 10 th Street Homestead, PA 15120	
Charter School Contact Person:		LaShawn Fields – Enrollment Specialist	
Telephone:	412-325-7305 ext. 102	Email Address:	lfields@propelschools.org

I. Student Information:

Last Name:		First Name:		MI:	
Home Address:					
City:		State:		Zip Code:	
County:		Telephone:			
Mailing Address (If Different From Home Address)					
City:		State:		Zip Code:	
Date Of Birth:		Age:		Race:	
				Gender:	

II. School District of Residence and Former School Information

School District of Residence:					
Former School Information (Other Than Pre-School):					
	Public School		Charter School		Home School
					Nonpublic School
Student Not Enrolled in School Preceding Enrollment in Charter School Because:					
	Entering Kindergarten		Re-Enrolling Dropout		Other
Name of Former School:					
Address of Former School:					
Previous Grade:		Withdrawal Date From Former School (Last Day):			
Was your child receiving special education services based on an IEP?				Yes	No
If Yes, do you have the child's special education records (IEP)?				Yes	No

III. Parent/Guardian Information:

Child Lives With:		Both Parents		Both Parents Alternately		Mother Only		Father Only
		Legal Guardian		Foster Parents		Other Adult		
Special Custodial Court Instructions: (If Yes, Please Provide a Copy of Court Order.)					Yes		No	

Complete Parent/Guardian Name and Address Information As Applicable

Father's Name							
Address:							
City:				State:		Zip Code:	
Home Telephone:			Work Telephone:				

Mother's Name							
Address:							
City:				State:		Zip Code:	
Home Telephone:			Work Telephone:				

If The Student Is Not Living With Parents, Please Complete This Section.

	Guardian's Name	Or		Foster Parent's Name	Or		Other Adult Name
Name:							
Address:							
City:				State:		Zip Code:	

My signature on this form indicates my decision to have my child attend the charter school named on page 1 of this form and signifies my request that appropriate school records be forwarded from the school district to the charter school.

Signature of Parent/Guardian:						Date:	
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IV. To Be Completed By Charter School:

Verification of Date of Birth:		Birth Certificate		Other				
Proof of Residency		Mortgage Statement		Lease		Utility Bill		Other
Official Enrollment Date:				Anticipated Date of Attendance:				
Grade Student Is Entering:								

Signature of Charter School Representative:							
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