



STUDENT AND FAMILY SUPPORT SERVICES at the
Family and Community Engagement Center
230 East Douglas Avenue Fort Wayne, IN 46802

Address Change Form 2020-21

Student Name	Student Number	Student Grade

Parent/Guardian requesting student(s) to remain at present school. Yes ___ No ___

(Transportation may not be provided for students whose verified residence is outside of FWCS, within the NTZ zone, or outside chosen school boundary.)

Old Address _____
(street) (city) (zip code)

New Address _____
(street) (city) (zip code)

Phone Number _____
(home) (cell) (work)

Parent/Guardian Signature _____ Date ____ / ____ / ____

Parent/Guardian must provide proofs of residency when making an address change.
(Attention schools: Proofs of residency must be attached to this document prior to submission.)

Principal/Designee's Signature _____

School _____ Date ____ / ____ / ____

***** Student and Family Support Services Use Only *****

Present school _____ Date Completed ____ / ____ / ____

New school _____ Signature _____