CHANGE OF ADDRESS INSTRUCTIONS

- 1. <u>Complete the change of address for</u>mAdditional forms may be found on the website at <u>www.cbsd.org</u>
- 2. <u>Submit</u> the change of address form and your proof of residenday mail, fax, email or in person to Central Registration:

Central Bucks School District (Phone) 267 8932111 Registration Office (Fax) 267 89340

16 Welden Drive

Doylestown, Pa 18901 centralregistratio@dosd.org

Three proofs of residency are required

Proof of Residency: A) Deed/Lease/Agreement of Sale

B) Two Utility Bills/Billing Statements

<u>NOTE</u>: Contracts to purchase or lease a property may be used <u>itoitiate</u> a change of address. We will request additional verification of occupancy/deed in thirty day (b(na)8.9 .002 Tw na)8.9 .

Central Bucks School District Change of Address Form

Date:			
Student	School	Grade	Resides with: (check all that apply)
			† Mother † Father †Stepparent
			† Guardian † Other (please explain)
			† Mother † Father †Stepparent
			Other (please explain)
			† Mother † Father † Stepparent
			† Guardian † Other (please explain)
:		Parent/G	uardian
New Address			
Effective Date:			
Previous Address			
Emait	Phone		
Email	_ <u>F11</u> 011&		
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days	noalion of occupancy	(Dood) our	ny lamina no rodani da anta roda do comercini ty
	SE Multiple Occupa	n(tMultiple	Occupancy Affidavit Required)
• .			rdian Signature)
	X	•	Date:
	,		rdian Signature)
		_	of address are processed at
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