RHS Student Change of Information Form

Student name:	Grade:	: Date:
Sibling name(s):		
NAME CHANGE/GUARDIAN CHAI	NGE	
*must provide proof of court docu	mentation & ID	
Former Parent/Guardian Name:		Keep: Delete:
Change of Parent/ Guardian Name:		
Student Name Change:		
CHANGE OF ADDRESS		
*must provide two statements of r	nost recent utility bills for n	ew address
Former Address:		·
New Residence Address:		
New Mailing Address:		
CHANGE OF CONTACT INFORMAT	TION	
Name: Ne	w #: Ne	ew Email:
Name: Ne	w #: Ne	ew Email:
Name: Ne	w #: Ne	ew Email:
PARENT/GUARDIAN EMPLOYME	NT CHANGE	
Parent/Guardian Name:		
	Work #:	
New Employer:		•
New Employer: Parent/Guardian Name:		•