

## **Washington Township Public Schools** Registration Office, 206 E. Holly Avenue, Sewell, NJ 08080

(856) 689-6644 Ext. 6698 Fax (856) 589-1385 mpesyna@wtps.org

## **CHANGE OF ADDRESS NOTIFICATION**

Please complete the **highlighted** sections below and provide **2 current proofs of residency**. If you just made settlement, you may use the signed settlment sheet/deed in lieu of 2 proofs. Please email, fax, or return to the Registration Office. List all children on the same form.

PLEASE NOTE: It takes at least 24 hours to process the change in our databases. Please be sure to send us your documentation as soon as you move.

	 <b>-</b>	
Date:		
Student Name(s):		
School/Grade:		
Previous Address:		
New Address:		
Alternate Parent Address (if applicable):		
What is the child's primary residence?		
Guardian 1 - Name:	Phone #:	
Email address:		
Guardian 2 - Name:	Phone #:	
Email address:		
With whom does the student(s) reside?		
Do you share this residence with another family?		