APEX FRIENDSHIP HIGH CHANGE OF ADDRESS INSTRUCTIONS

In order to complete an address change, we need:

- School Assignment form (2805-routine)
- Proof of Residence in the form of a current (within the last 30 days) electric, gas or water bill, a signed lease agreement in the last 60 days, or a settlement or closing statement within 30 days in the name of the parent or court-appointed guardian.
- A copy of the parents ID
- Transportation service request form (if bus is needed)

You can come in to the school to complete the paperwork or email all necessary paperwork including a copy of parent's ID to lcolhoun@wcpss.net. If you have any questions, contact Linda Colhoun at 919-694-0500 ext. 20016.

SCHOOL ASSIGNMENT FORM (2805 – ROUTINE) – Revised 7/22/2016

STUDENT'S NAI	ME:					
V. =	First	Middle		Last		
				Race:		
Address:			_			
3343-44		1 to 1 to 1 to 1				
221222222						
REASON FOR R	_		. ' 1 '11	11		
	 New address (current gas/water/electric bill; new signed lease) Parent AND student residing with relatives or friends 60 					
	□ Custody					
	□ Joint Custody – selection of school 50.1					
	□ Legal Custody 50.3					
	Foster Place					
	□ Group Home					
		offer to purchase con	tract w/in	45 days) 70.1		
Previous Address	□ Charter School (summer only) 40				
rievious Address	(211 - 111 					
Last School Attended						
Last School Attended				War and a state of the state of		
I want understranspour ne	my child to continue attend stand that if I have moved o ortation for my child to and w address for the next scho	ling this (current) school utside the base attendanc from school. I also und ol year.	for the remarke area for the	ainder of the school year. I e school, I will be responsible my child will be assigned to the address. (I will submit a trans	for providing e base school for	
	.]	Parent/Guardian A	ffidavit			
I verify that the information contained on this School Assignment Form is true and accurate. I verify that any information/documentation I have provided in support of this information is true and accurate. I attest that the information contained in this document is true and accurate and I understand that if school officials determine I have misrepresented any material in this School Assignment Form, this school assignment will be revoked and my child will be immediately assigned to his/her correct school.						
Print Parent/Guardian Na	ame					
Parent/Guardian Signatur	re					
Telephone Numbers	Home		_Office			
				RT DATE		
Signati	are of Approving School S	taff		Date		

TRANSPORTATION SERVICE REQUEST



National House

Use this form to request transportation service for students based on their home address of record with WCPSS. Parents must complete this form approximately one month before the start of school to guarantee bus service on the first day of school. Specific deadlines for requesting service can be found at www.wcpss.net/transportation. Students must be eligible for transportation to receive services. To check eligibility, visit www.wcpss.net/preview. Requests received after 30 days prior to the first day of school will be processed in the order received. Eligible students will be added to existing bus stops during the first 30 days of school if there is capacity. Bus stop locations are posted on the WCPSS Transportation web page at least one week prior to the start of school.

Si necesita servicios de traducción gratuitos para comprender los procesos escolares, llame al (919) 852-3303

إذا كنت بحاجة إلى خدمات الترجمة المجانية للتعرف على سير العمليات بالمدرسة، اتصل بالرقم بالرقم 852-3303 (919) Si vous avez besoin de services de traduction gratuits pour comprendre les procédures scolaires, appelez le (919) 852-3303 यदि आपको विचालय की प्रक्रियाओं को समझने के लिए नि:शुल्क अनुवाद सेवाएं चाहिए, तो (919) 852-3303 पर कॉल कर्र 학교/교육 과정에 관한 무료 번역 서비스가 필요하시면 다음 번호로 언락하여 주십시오 (919) 852-3303 Nếu quý vị cán sự thông dịch miền phí để hiểu phương pháp trường học, xin vui lòng gọi số điện thoại (919) 852-3303

如果您需要免费翻译服务来了解学校流程,请致电(919)852-3303

TRANSPORTATION REQUEST:	2432,433					
Will your student need bus transportation?		Name of school enrolled	Name of school enrolled			
☐ Yes ☐ No						
If yes, when will this student need transportation? AM/PM (round-trip) AM only (morning rider) PM only (afternoon rider)						
-PARENIMGUARDIAN INFORMATI	ojy v					
Parent's First Name		Parent's Last Name				
		Phone Number (Best number to reach you)				
E-mail						
Street Address						
	State		Zip Code			
City		The state of the s				
STUDENT INFORMATION		p ♥ san chi san				
Student's First Name		Student's Last Name				
Streel Address (If different from parent)						
State			Zip Code			
City	5.0.0					

FOR OFFICE USE ONLY Rigistering school	Student ID Number	Name of Staff Member
5. Table 116-116-116-116-116-116-116-116-116-116	(no	I