

Bellevue City School District  
**STUDENT CHANGE OF ADDRESS FORM**

**Please complete this form and attach a proof of residency for your new address.**

Valid proofs include rental, lease, or purchase agreement; utility bill; checking or savings account statement; employment forms; tax bill; car insurance; vehicle registration; cell phone bill; legal documents showing address; driver's license; voter registration.

**This form with proof of residency must be returned to the Board of Education office.**

Old Address	City	Zip	Phone Number
New Address	City	Zip	Phone Number
	County		

**OUR NEW ADDRESS IS EFFECTIVE ON THIS DATE (MM/DD/YYYY):**

**Please fill out this form only once per address change, listing all students who reside in your household. We will change the primary address for all students listed below.**

Last Name	First Name	Middle	Gr.	School

**Bus Transportation Required? (Bellevue Residents only)**     Yes     No

<b>Bus Number</b>	<b>Pick Up</b>	<b>Drop Off</b>
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Signature of Parent/Guardian	Relationship to Student	Date
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For Office Use: Received by:	Date
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School Notified	Transportation
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