

NEW HOPE-SOLEBURY SCHOOL DISTRICT
CENTRAL REGISTRATION OFFICE
186 W. Bridge Street New Hope, PA 18938
Email: mguertler@nhsd.org
Phone: 215-862-8187 / Fax: 215-862-2906

OFFICE NOTES School IEP eSchool
 Nurse Custody Agreement
 Transportation DO _____
 Other _____
 Initials / Date _____

CHANGE OF ADDRESS FORM

When there is a change of address within the district, parents/guardians must present change of address through a current deed or notarized lease agreement, parent/guardian photo ID, and three proofs of new address, as well as custody agreement (if applicable). This information will need to be delivered the Central Registration Office within one week of the address change. Student records will be updated and transportation will be notified after receipt of all requested documentation.

Student Name	NHSD School	Grade	Does student have an IEP?

Student(s) **Previous** Address _____ City _____ State _____ Zip _____

Student(s) **Current** Address _____ City _____ State _____ Zip _____

PARENT/GUARDIAN INFORMATION (COMPLETE SECTIONS I AND II AS APPLICABLE)

I. Parent/Guardian Full Name _____

Address (if different than student) _____

Email Address _____ Home Phone # _____ Mobile Phone # _____ Work Phone # _____

Name of Stepparent (if applicable) _____ Email Address _____ Mobile Phone # _____ Work Phone # _____

II. Parent/Guardian Full Name _____

Address (if different than student) _____

Email Address _____ Home Phone # _____ Mobile Phone # _____ Work Phone # _____

Name of Stepparent (if applicable) _____ Email Address _____ Mobile Phone # _____ Work Phone # _____

With whom does the student reside (Check all that apply) mother father stepparent guardian

other (please explain) _____

STUDENT REGISTRATION AFFIDAVIT

In cases of divorce/separation, either a current custody agreement must be provided OR both parents must sign form to acknowledge that child/children will attend school in New Hope-Solebury School District.

(Please check one)
 This is to certify that I am the PARENT GUARDIAN of the pupil(s) registered on this form.

 Signature

 Date

(Please check one)
 This is to certify that I am the PARENT GUARDIAN of the pupil(s) registered on this form.

 Signature

 Date