



York Suburban School District

CHANGE OF ADDRESS FORM

This form, and the required proofs of residency, should be returned to the District's Registration Office by email registration@yssd.org, faxed to 717-885-1211, or delivered in person to the Ronald Provard Education Center located at 1800 Hollywood Drive, York, PA 17403.

PLEASE NOTE: Student Records will be updated and transportation arrangements made AFTER all requested documentation has been received.

Student Information

List all students affected by the change of address.

STUDENT'S FIRST AND LAST NAME	BIRTHDATE	GRADE	CURRENT SCHOOL

NEW Address Information

STREET #	STREET NAME	APT#	CITY	STATE	ZIP CODE

Date of your move/address change: _____

Residency Status: I own my home. I rent my home.
 I live with a family member. Other

OLD Address Information

STREET #	STREET NAME	APT#	CITY	STATE	ZIP CODE



Parent/Guardian Information

Is there a custody order? Yes No

FIRST AND LAST NAME	BIRTHDATE	RELATIONSHIP	CONTACT INFORMATION
			Phone:
			Email Address:
			Phone:
			Email Address:

Other Household Members Information

List ALL individuals living at the new address.

FIRST AND LAST NAME	BIRTHDATE	RELATIONSHIP TO STUDENT(S)

REQUIRED Proof of Residency

When there is a change of address within the district, parents/guardians must present **TWO** new proofs of residency. Acceptable documents include:

- Valid PA photo identification with your current address. If you are a PA resident and have moved within the last 15 days, we request a change of address card
- Settlement Statement, Lease/Rental Agreement, or Real Estate Tax Bill
- Vehicle Registration
- Current Utility Bill (electric, water, gas, oil, phone, or cable)
- Renter/Homeowners Insurance

If you are an occupant in the home of another resident:

- Obtain and complete a Residency Affidavit from the District’s registration office.
- Have the Residency Affidavit notarized.
- A Shared Residency affidavit will require proof of residency from the owner/lease holder of the new address.

I verify the information contained in this change of address form is true and correct to the best of my knowledge, information and belief. I authorized the York Suburban School District to investigate the above information to confirm accuracy.

Signature of Parent/Guardian #1 _____ Date: _____

Signature of Parent/Guardian #2 _____ Date: _____