

Change of Address Form

Parent(s) Name Moving (If both parents are not moving, we will keep the parent not listed at former address.):	Effective Date of Change:			
the parent not listed at former address.).				
Please provide your student(s) name and grade:				
Student Name:	Grade:			
Student Name:	Grade:			
Student Name:	Grade:			
Student Name:	Grade:			
	1			
Former Address (number and street name):				
City:				
Shahar				
State:				
New Address (number and street name):				
City:				
State:				
State.				
Phone Number:				

1. Please attach new proof of residency for Region School 15:

- Rental lease/proof of homeownership (deed, mortgage statement, current tax bill)
- Two current Utility Bills (gas, electric, cable TV)

2. Please return form and proof of residency in one of the following ways:

- Mail Region 15 Board of Education Office Att: Kelly Zablauskas 286 Whittemore Rd PO Box 395 Middlebury, CT 06762-0395
- Email to: registration@region15.org

Contact Person:

Kelly Zablauskas

PowerSchool Admin/Registrar

Phone: (203) 758-8259 extension 123

cc: Transportation, Special Education, Cum File