



WESTERVILLE CITY SCHOOL DISTRICT CHANGE OF ADDRESS FORM

*Please Note: Possible school transfers and new transportation will begin two (2) business days from the date of receipt at the Enrollment Center

In order for this Change of Address to be processed, you must provide the completed form, your photo I.D. and two (2) proofs of residency, as listed on Page 2

DATE RECEIVED: _____
DATE OF MOVE: _____

STUDENT NAME(S) (FIRST AND LAST):	ID #	GRADE	CURRENT SCHOOL:	NEWLY ASSIGNED SCHOOL:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

OLD ADDRESS:

(STREET) (CITY) (ZIP)

OFFICE USE ONLY: _____ / _____ / _____
ES MS HS

NEW ADDRESS:

(STREET) (CITY) (ZIP)

LEASE EXPIRATION DATE _____

OFFICE USE ONLY: _____ / _____ / _____
ES MS HS

Have you applied for Open Enrollment:

- ✕ Remainder of the current school year: **YES** **NO**
- ✕ For next school year: **YES** **NO**

***HIGH SCHOOL / MIDDLE SCHOOL OPEN ENROLLMENT DEADLINE = MARCH 15TH FOR NEXT YEAR**
***ELEMENTARY OPEN ENROLLMENT DEADLINE = MAY 1ST FOR NEXT YEAR**

***IF OPEN ENROLLMENT IS APPROVED, TRANSPORTATION IS THE RESPONSIBILITY OF THE PARENT**

Has there been any change in the custodial parents' marital status? **YES** **NO**

Has there been any change in the custodial parents' living situation? **YES** **NO**

Other Custodial Parent Address: _____

(IF AT DIFFERENT ADDRESS) (STREET) (CITY) (ZIP)

CUSTODIAL PARENT CONTACT INFORMATION:

(HOME) _____

(CELL) _____

(WORK) _____

OFFICE USE ONLY

PS _____ DS _____
SS _____ EMAIL _____
COA _____
Ret Mail _____

CUSTODIAL PARENT NAME (PRINT): _____

CUSTODIAL PARENT SIGNATURE: _____

PREFERRED PHONE NUMBER: _____

ITEMS REQUIRED FOR CHANGE OF ADDRESS PROCESSING

I. PHOTO ID FOR CUSTODIAL PARENT

II. VERIFICATION OF RESIDENCE – TWO (2) PROOFS OF RESIDENCY REQUIRED*

**OATH OF RESIDENCY: If the custodial parent is living with a friend or family member who owns a home within the Westerville School District attendance boundaries, that resident must also provide their photo ID and their two (2) required proofs of residency and complete the Oath of Residency form.*

**If the custodial parent is living with a friend or family member who has a Lease, the custodial parent's name must be on the Lease as a tenant or occupant.*

ONE (1) FROM A AND ONE FROM B:

A:

- Current Active* Rental/Lease Agreement with custodial parent's name listed on the lease (with the option to redact only the financial information); **or**

**If on month-to-month lease, please email that lease and current verification from landlord, including landlord's contact information, on business letterhead*

- Current (dated within the past 30 days) Mortgage Statement with custodial parent's name listed (with the option to redact only the financial information); **or**
- Purchase/Contract Agreement to buy property (if you will close on the sale of the property within 90 days of enrollment) (with the option to redact only the financial information);

AND

B:

- Current (dated within the past 30 days) Public Utility Bill, showing service address at Westerville School District residence, and custodial parent/legal guardian's name (i.e., Gas, Water, Electric, Landline Phone, Cable, or Internet); **or**
- Current (dated within the past 30 days) Government Mailing showing Westerville School District address and custodial parent/legal guardian's name (i.e., child support, government assistance)

Please send forms and documents by email to welcome@westerville.k12.oh.us or fax to 614-797-7701.

RESIDENCY AFFIDAVIT

I, _____, hereby certify that I have established residency, seven (7) days a week in the Westerville City School District and I am not maintaining a separate residency elsewhere. I am the parent, guardian, or legal custodian of _____ and I live at: _____

Address Apt # City Zip

This has been my place of residence since _____.

I acknowledge and understand that if the above information is not true and correct, that knowingly swearing or affirming the truth thereof constitutes criminal falsification and is a violation of Ohio Revised Code, Section 23921.13, a first degree misdemeanor, punishable by a maximum fine of \$1,000 and/or a maximum term of imprisonment of six months. Further, if the student is found to not be a legal resident, the district will seek remuneration of each day the student illegally attended school in the district. False information may result in the loss of a student's athletic eligibility for one calendar year.

I agree that the Westerville City Schools (WCS), if they deem necessary, have the right to verify my residency. I hereby give my permission for release of information to a representative of WCS pertaining to my residency from rental offices, realtors, and /or utility providers.

Sworn to and subscribed before me this _____ day of _____, 20 _____.
Signature of Parent/Guardian Date

Notary Signature

OATH OF RESIDENCY

******* FOR FAMILIES LIVING WITH RELATIVES OR FRIENDS ONLY *******
(to be completed if the custodial/residential parent does NOT have a mortgage in their name for the Westerville School address listed above)

I, _____, do solemnly swear or attest that the person(s) named below lives at the following address and I have provided a current mortgage statement, along with a current gas, electric or water bill:

Name(s) of Parent(s) or Guardian

Child(ren) Name(s)

Street Address, City, Zip Code

Owner Initial Here

As Owner, I understand that this statement is being made in order to provide proof of residency so that the above named child(ren) may be admitted to the Westerville City School District. Persons who knowingly falsify this information are subject to legal action and the child's immediate withdrawal from school.

Parent Initial Here

As the enrolling parent(s)/guardian, I, _____, attest that I do not live in any other residence and that this living arrangement is not solely for the purpose of establishing school attendance eligibility. I understand I will provide two (2) current proofs of residency; and, that if I should establish my own residence, I will immediately complete a Change of Address form and provide the Enrollment Center with my photo ID and two (2) proofs of my new address.

If you do not provide the necessary documents to CLOSE this affidavit, your child(ren) will be immediately withdrawn from the school district

Signature of Owner Date

Sworn to and subscribed before me this _____ day of _____, 20 _____.

Notary Signature

Signature of Enrollment Parent Date