



# The Academy

“Pursuing Truth, Wisdom, Excellence”

**Mission Statement:** “The Academy serves our students to develop college ready, exemplary citizens by promoting excellence in academics, character and relationships.”

## Household Change Form



In addition to this completed form, **both sides**, we also require-

- 1 form of verification of residency (mortgage statement, lease agreement, current utility bill—  
Note- disconnect notices will not be accepted)
- Copy of Parent/Guardian photo I.D.

### *Student Data (This section must be completed)*

Student’s Legal Last Name	Student’s Legal First Name	Grade Level	Date of Birth

### *Primary Household (where student(s) reside majority of the time)*

*Note- Step-parent must be listed as an emergency contact*

NEW Residence Street Address				
NEW City	NEW State	NEW Zip	NEW County	NEW Primary Phone Number
NEW Mailing Address (if different from above)				
NEW City	NEW State	NEW Zip	NEW County	
Parent/Guardian Last Name		Parent/Guardian First Name		<input type="checkbox"/> Male <input type="checkbox"/> Female
NEW Work Phone		NEW Cell Phone		New Email Address
Parent/Guardian Last Name		Parent/Guardian First Name		<input type="checkbox"/> Male <input type="checkbox"/> Female
NEW Work Phone		NEW Cell Phone		New Email Address

### *Secondary Household (Parent/Guardian that resides at another address)*

*Note- Step-parent must be listed as an emergency contact*

NEW Residence Street Address				
NEW City	NEW State	NEW Zip	NEW County	NEW Primary Phone Number
NEW Mailing Address (if different from above)				
NEW City	NEW State	NEW Zip	NEW County	
Parent/Guardian Last Name		Parent/Guardian First Name		<input type="checkbox"/> Male <input type="checkbox"/> Female
NEW Work Phone		NEW Cell Phone		New Email Address
Parent/Guardian Last Name		Parent/Guardian First Name		<input type="checkbox"/> Male <input type="checkbox"/> Female
NEW Work Phone		NEW Cell Phone		New Email Address

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<b>Current Residence Status</b> (where student(s) reside majority of the time) <i>Residency is important as it can directly relate to rights under the McKinney-Vento Homeless Assistance Act.</i>	
<input type="checkbox"/> House/Apt/Condo/Townhouse/Duplex <input type="checkbox"/> Motel/Hotel <input type="checkbox"/> Campground/RV/Car <input type="checkbox"/> Emergency Shelter	<input type="checkbox"/> Transitional Housing Program <input type="checkbox"/> Are you living with friends/family due to loss of housing or financial hardship? <input type="checkbox"/> Are you a student not living with a parent or legal guardian? <input type="checkbox"/> Other, please describe _____

<b>Non-Household Emergency Contact Information</b> Only 3 contacts will be allowed in PowerSchool.				
Priority	Contact Name (last, first)	Relationship	Phone Number	Phone Type
1				<input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home
2				<input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home
3				<input type="checkbox"/> Mobile <input type="checkbox"/> Work <input type="checkbox"/> Home

1. Please note that federal law requires that educational records concerning a child be shared with a parent regardless of his/her custody status or decision making authority absent a court order limiting such disclosures. Please submit such court order if applicable.
2. By default, parents who reside at both the primary household and secondary household will be allowed to pick up the child from school.
3. Be aware that without prior notice or verification, students will not be released early during the day to anyone other than a parent/legal guardian.

Parent/Guardian Signature \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_ Date \_\_\_\_\_

**For Office Use Only:**

Type of verification of residency provided:

Utility Bill (within 60 days)     
  Mortgage Statement     
  Lease Agreement

District of Residency: \_\_\_\_\_

Entered into PS by \_\_\_\_\_ on \_\_\_\_\_