

**Sidney City Schools**  
**Change of Address Form**

**Today's Date:** \_\_\_\_\_

**Student's Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Previous Address:** \_\_\_\_\_  
\_\_\_\_\_

**New Address:** \_\_\_\_\_  
\_\_\_\_\_

**Date Moved to New Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**For Office Use Only:** Please copies to Deb Kaufman, Beth Raterman, and Lola Fair at the Board of Education office. SHS should also send a copy to the Guidance Office.