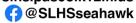


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Kara Merlin • Principal
Assistant Principals: Douglas Elias • Tisha Doohen
Cady Baer • Christine Ramirez • Jeffrey Wolff

CHANGE OF ADDRESS FORM

Processed Date:

| Evidence of residence: Three Forms Proof of Residency Required. | | |
|---|--------------------------|-----------|
| Must provide: | | |
| Owned Residence – Deed or Property Tax Assessment records, | | |
| Leased Residence – Current Lease or Rental Agreement, | | |
| A copy of a current utility (electric/water) bill or initial order for service; AND one of the following current documents supporting stated address: Auto Registration, Florida Driver's License, Florida ID card, or Voter Registration Card. | | |
| Today's Date: | Transportation Needed: _ | |
| Student Name: | | |
| Student Date of Birth: | | |
| Student ID #: | | |
| New Address | | |
| Number and Street Name: | | |
| City: | State: | Zip Code: |
| Phone Number: | | |
| Parent/Guardian Signature: | | |
| | | |
| (| OFFICE USE ONLY | |