

STUDENT MAINTENANCE FORM

From _____

Central Office _____

Today's Date _____

Date of Withdrawal/Intra-district move _____

Transfer to another building within district

Move within New York State

Move out of New York State

Address Change

Phone Change

Last Name _____ First Name _____ ID # _____ D/B _____ Grade _____

Last Name _____ First Name _____ ID # _____ D/B _____ Grade _____

Last Name _____ First Name _____ ID # _____ D/B _____ Grade _____

Last Name _____ First Name _____ ID# _____ D/B _____ Grade _____

This is a Family Move

or This is an individual move

Old Address _____

New Address _____

Phone number Changes Cell# _____ # Home _____ # work _____

Name of person making these changes _____

Relationship to Child/Children _____

Signature _____

Other changes _____

MIS

Transportation

Administration

Schools _____

Schools _____

Date Entered _____