

## Charter School for Applied Technologies

## **Address Change Form**

| Head of Household Last Name   | Name(s) and Grade Levels(s) of Students in your Household  |   |  |  |
|---|--|---|--|--|
| The above named student(s) currently live(s):   |  |   |  |  |
| ☐ IN PERMANENT HOUSING ACCEPTABLE AS PROOF:   | : TWO PROOFS C   | OF RESIDENCY ARE REQ  | UIRED; THE FOLLOWING ARE   |  |
| <ul> <li>□ Property Tax Bill</li> <li>□ Mortgage Statement</li> <li>□ Homeowner's Agreement</li> <li>□ DSS Landlord Statement</li> <li>□ DSS Shelter Verification</li> </ul>  | <ul> <li>□ House Deed</li> <li>□ Real Estate Document</li> <li>□ Notarized Landlo</li> <li>□ Rental Agreemen</li> <li>□ Property Sale Control</li> </ul> | ord Affidavit 🗆 Utility Bill<br>t 🗆 Another U   | rement<br>er's/Renter's Insurance<br>(showing <b>service</b> address)<br>tility Bill (showing <b>service</b> address)<br>Address Change Confirmation |  |
| (A DRIVER'S LICENSE, AUT  | O INSURANCE, CRI   | EDIT CARD OR MEDICAL  | BILLS ARE <u>NOT</u> ACCEPTABLE)   |  |
| ☐ Temporarily with another fam<br>(sometimes referred to as "d  |  | ecause of loss of housing a   | s a result of economic hardship  |  |
| □ In a hotel/motel<br>□ In a shelter  | _  | ☐ In a car, park, bus, train, or campsite ☐ Other temporary housing   |  |  |
| New Address:  |  |   |  |  |
| Street Address  | Apt.   | City  | State Zip Code   |  |
| Actual Date of Address Change   |  | e this as Mailing Address?<br>Address is different, please  | ☐ Yes ☐ No<br>write it on the back of this form)   |  |
| Home Phone Number   | Work   | Ce  | ell  |  |
| Old Address:  |  |   |  |  |
| Street Address  |  | City  | State Zip Code   |  |
| Parent/Guardian's Name (Print Clea  | urly)  | Signature   | Today's Date   |  |
| -   | Enrollment Office<br>317 V<br>Buffalo, 1   | ofs of Residency must be - Family Support Cent<br>fulcan Street<br>New York 14207<br>dension 5105 Fax: (716                     | er   |  |
| Your selection above will help CSAT deter<br>Students who are protected under the Mc<br>documents normally needed, such as pro-<br>protected under the McKinney-Vento Act<br>supersede CSAT's lottery, waitlist, and en | rmine what services yo<br>Kinney-Vento Act are o<br>of of residency, school i<br>may also be entitled to   | u or your child may be able to<br>entitled to immediate enrollm<br>records, immunization record<br>free transportation and othe | o receive under the McKinney-Vento Act.<br>ent in school even if they don't have the<br>ls, or birth certificate. Students who are                   |  |
| Office Use Only:  |  |   |  |  |

**New Residential School District** 

**Previous Residential School District**