Poudre School District Early Childhood Programs Data Change Form

| Student Name: | | | | ID: | |
|---------------------------------|---|---|-------------------|---------------------------------|-------------|
| Parents/Guardian | : | | .• | | |
| Teacher: | | Classroom Loca | tion: | | |
| New Address Inf | formation (must provide proof of a | address): | | | |
| Home Address: _ | | | | | |
| _ | ddress results in the family living in: | (Please choose on | e of the followin | <u>g)</u> | |
| \square a shelter, | | | | | |
| \square a motel/hotel | l, | | | | |
| □ temporarily v | with more than one family becau | use of economic | hardship | | |
| □ regular housi | ing (apartment, house, mobile he | ome, etc.), | | | |
| \Box other please | explain: | | | | |
| Is student currently | ly receiving transportation?? Yes | <u>N</u> o□ | | | |
| Phone Number (| <u>Change:</u> | | | | |
| Home Phone: | | Work Phone: | | | |
| Change ☐ Additional ☐ | | Change □ Additional □ Mother □ Father □ | | | |
| | | 8- — | | | |
| Mother's Cell Phone: | | Father's Cell Phone: | | | |
| Change ☐ Additional ☐ | | Change \square Additional \square | | | |
| Emergency Cont | tact Information Change: (Must b | e at least 16 years | s old) | | |
| ADD Emergency | Contact | | | | |
| Name | Relationship to Student | Home Phone | Cell Phone | Contact for Emergency? | Release to |
| Name | Relationship to Student | Home Phone | Cell Phone | Contact for Emergency? | Release to |
| REMOVE Emerg | gency Contact | | | | |
| Name | Relationship to Child | Home Phone | | Cell Phone | |
| Name | Relationship to Child | Home Phone | | Cell Phone | |
| | | Di Ci | 4 41 • 1 | 641 * 6 * 1 | |
| Additional Comm | For Custody Changes- | · Please IIII ou | it other side | e of this form! | |
| | | | | | |
| | | | | | |
| Parent/Guardian Signature | | Date | | Phone | |
| Early Childhood Staff Use Only: | | | | Updated PIR | |
| Change Verified I | by: | | | Updated Nighttime Reside | nce |
| Changes made to 0 | Child Plus (date): | nitials: | П | Undated Neighborhood Sch | ool |

New Guardian Information (must provide proof of address and copies of official custody paperwork): Guardian #1 Name: Guardian #1 Date of Birth: Relationship to Child: Guardian #1 Race: American Indian/Alaskan□ Asian□ Black/African American□ Native Hawaiian/Pacific Islander□ White□ Do you consider your ethnicity to be Latino or Hispanic? Yes \square No \square Guardian #1 email: Guardian #1 Last Grade Completed: Bachelor or Above□ Associate's Degree□ Trade School□ Post High School□ High School Diploma□ GED□ No Diploma□ Guardian #1 Current Employment Status: Full-time□ Part-time□ Seasonal□ Unemployed□ Student□ Self-employed□ Stay-at-home□ Retired/Disabled□ Guardian #2 Name:_____ Guardian #2 Date of Birth: ______Relationship to Child: _____ Guardian #1 Race: American Indian/Alaskan□ Asian□ Black/African American□ Native Hawaiian/Pacific Islander□ White □ Do you consider your ethnicity to be Latino or Hispanic? Yes \square No \square Guardian #2 email: Guardian #1 Last Grade Completed: Bachelor or Above ☐ Associate degree ☐ Trade School ☐ Post High School ☐ High School Diploma ☐ GED ☐ No Diploma ☐ Guardian #1 Current Employment Status (please circle): Full-time□ Part-time□ Seasonal□ Unemployed□ Student□ Self-employed□ Stay-at-home□ Retired/Disabled□ Are there protective orders? Yes \square No \square If so, please provide a copy. Please list all living in the household: Relationship to child School (if applicable) Financially supported by Full Name Date of Birth guardian. (Y/N)