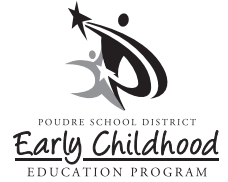


Data Change Form (Signature Required)

I understand this change can take up to 10 days

Poudre School District Early Childhood Education Program

Fullana Learning Center
220 N. Grant Avenue, Fort Collins, CO 80521
Phone: (970) 490-3204 Fax: (970) 490-3134
Email: psdece@psdschools.org bit.ly/PSDpreschool



Student Name: _____

Parents/Guardian: _____

Teacher: _____ Classroom Location: _____

Is **student** currently receiving bus transportation? ☐ Yes ☐ No

Release/Emergency Contact Information Change: (Must be at least 16 years old)

ADD Contact

			✓ Release	✓ Emergency
First/Last Name	Relationship to Student	Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>
First/Last Name	Relationship to Student	Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>

REMOVE Contact

			✓ Release	✓ Emergency
First/Last Name	Relationship to Student	Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>
First/Last Name	Relationship to Student	Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>

ADDRESS CHANGE ONLY: (Must provide new proof of address)

Home Address: _____

This change of address results in the family living in: (Please choose one of the following)

- ☐ a shelter ☐ a motel/hotel ☐ temporarily with more than one family because of economic hardship
☐ regular housing (apartment, house, mobile home, etc.)

PHONE CHANGE:

Mother's Phone: (Change/Add) _____ Father's Phone: (Change/Add) _____
☐ Cell ☐ Work ☐ Home ☐ Cell ☐ Work ☐ Home

Additional Comments/Changes:

Parent/Guardian Signature

Date

Phone

Early Childhood Staff Use Only:

Change Verified by: _____

Changes made to Child Plus (date): _____ Initials: _____

☐ Updated PIR

☐ Updated Neighborhood School

For Custody Changes Only

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 ☐ White

☐ Native Hawaiian/Pacific Islander

Do you consider your ethnicity to be Latino or Hispanic? ☐ Yes ☐ No

Guardian #1 Email: _____

Guardian #1 Last Grade Completed: ☐ Bachelor or Above ☐ Associate's Degree ☐ Trade School

☐ High School Diploma ☐ GED ☐ No Diploma Last Grade Completed: _____

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 #2 Race: ☐ American Indian/Alaskan ☐ Asian ☐ Black/African American ☐ White

☐ Native Hawaiian/Pacific Islander

Do you consider your ethnicity to be Latino or Hispanic? ☐ Yes ☐ No

Guardian #2 Email: _____

Guardian #2 Last Grade Completed: ☐ Bachelor or Above ☐ Associate's Degree ☐ Trade School

☐ High School Diploma ☐ GED ☐ No Diploma Last Grade Completed: _____

Guardian #2 Current Employment Status: ☐ Full-time ☐ Part-time ☐ Seasonal ☐ Unemployed ☐ Student

☐ Self-employed ☐ Stay-at-home ☐ Retired/Disabled

Are there protective orders? ☐ Yes ☐ No If so, please provide a copy.

Please list all living in the household:

[illegible]