

I am using this form to update

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> my home address                | <input type="checkbox"/> my mobile phone number             | <input type="checkbox"/> my home phone number |
| <input type="checkbox"/> my parent/guardianship details | <input type="checkbox"/> parent/guardians work phone number | <input type="checkbox"/> an email address     |

**STUDENT DETAILS**

Student Name	<input type="text"/>	Student Signature	<input type="text"/>
Student Mobile	<input type="text"/>	Date	/ /

Please put an X in the appropriate box

- |   |   |
|---|---|
| <input type="checkbox"/> The whole family has moved to a new address as indicated on this form  | <input type="checkbox"/> He/she is now responsible for himself/herself in all aspects, He/she is also now living at the address indicated on this form and in future all correspondence is to be sent directly to him/her at that address.<br><b>Independent students MUST see the Deputy Principal</b> |
| <input type="checkbox"/> We have had a split in the family and he/she now lives with me at the address on your records. I will now be the sole parent, to receive all correspondence from the school and there is no contact with his/her father/mother.<br><b>Please supply paperwork to substantiate this or make an appointment to discuss with Student Services</b> | <input type="checkbox"/> We have had a split in the family and he/she now lives with me at the address on your records. His/her father/mother now lives at the address indicated on this form. Please send copies of reports and newsletters to each parent at the appropriate addresses.               |
| <input type="checkbox"/> I am still responsible for him/her and still expect all correspondence to be sent directly to me at the address you have on your records. However, he/she has now moved out of home and lives at the address indicated on this form  | <input type="checkbox"/> I am no longer responsible for him/her. That responsibility, including attendance, school finances and all correspondence has now transferred to the person named at the address indicated on this form  |

**ADDRESS PROOF OF STUDENTS NEW PLACE OF RESIDENCY REQUIRED (eg. drivers licence, electricity bill etc)**

Name of Parent/Guardian		Relationship to student	
<input type="text"/>		<input type="text"/>	
Street Address			
<input type="text"/>			
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Home Phone	Silent Number	Home Email Address	
<input type="text"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>	
Parent/Guardian Mobile Phone	Parent/Guardian Work Phone		
<input type="text"/>	<input type="text"/>		
Parent/Guardian Work Email			
<input type="text"/>			
Signature of Parent/Guardian		Signature of person now responsible for student	
<input type="text"/>		<input type="text"/>	

**Office Use only**

Proof of Residency sighted	<input type="checkbox"/> Yes <input type="checkbox"/> No	Entered on MAZE	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of Residency Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date	/ /