

EDINA PUBLIC SCHOOLS NEW RESIDENT/CHANGE OF ADDRESS FORM



I am a new Edina Public School district resident I have moved within the District and would like to update my address *

PARENT/GUARDIAN LAST	FIRST	MIDDLE	DOB	EMAIL ADDRESS	PHONE NUMBER
PARENT/GUARDIAN LAST	FIRST	MIDDLE	DOB	EMAIL ADDRESS	PHONE NUMBER

OLD ADDRESS	APT #	CITY	STATE	ZIP	
NEW ADDRESS	APT #	CITY	STATE	ZIP	MOVE IN DATE

Please attach a copy of your lease/purchase agreement. An official address change can only be made with this documentation!

If new to the District, please list all children, Birth-Grade 12

LAST NAME	FIRST NAME	MIDDLE NAME	CURRENT GRADE	GENDER	DATE OF BIRTH
				<input type="checkbox"/> M <input type="checkbox"/> F	___/___/___
				<input type="checkbox"/> M <input type="checkbox"/> F	___/___/___
				<input type="checkbox"/> M <input type="checkbox"/> F	___/___/___
				<input type="checkbox"/> M <input type="checkbox"/> F	___/___/___
				<input type="checkbox"/> M <input type="checkbox"/> F	___/___/___

*(*Note: If you are moving into a different school boundary then where your child(ren) currently attend - please contact us!)*

PLEASE RETURN TO: EDINA PUBLIC SCHOOLS (STUDENT ENROLLMENT CENTER) ROOM 171
 5701 NORMANDALE ROAD - EDINA, MN 55424
enrollment@edinaschools.org PHONE: (952) 848-4585 FAX: (952) 848-3937