



Effective Date: _____

Change of Address Form

Parent Name (*Primary Contact*): _____
LAST NAME FIRST NAME

Old Physical Address: _____ City _____ Zip: _____

New Physical Address: _____ City _____ Zip: _____

Mailing Address (if different from above): _____ City _____ Zip: _____

Home Phone #: (____) _____ (W) Phone # (____) _____ (C) Phone # (____) _____

MEMBERS RESIDING IN NEW HOUSEHOLD: (*Adults and child(ren) excluding yourself.*)

Full Name	Current School (<i>if Applicable</i>)	grade (<i>if Applicable</i>)

****MUST BE RETURNED TO CENTRAL REGISTRATION OFFICE****

Signature of Parent/Guardian

Date:

Printed Name

***** Office Use Only *****

Staff Member: _____

Building: _____

Date Received: _____

ELEMENTARY SCHOOL ZONE:

AWB ELEMENTARY

PBC ELEMENTARY



Proof of Residency Form

Parent/Guardian

Name: _____

911

Address: _____

(Residential)

City/State/Zip: _____

Student(s) Names & Grade:

Own or Rent? (Please circle one)

RCS Central School District **DOES NOT** accept tuition students.

To enroll you must reside in the school district. Solely owning property or a home does not constitute residency.

Proof of residency is required before a student may be registered. Post office boxes will not be accepted. You must provide at least two (2) proofs from the following list: (Where current is indicated this means valid or within the last 30 days. Your name and address must be indicated on these documents and current.)

___ Tax Bill (current)

___ Current Driver's License (name/address preprinted)

___ Current Utility Bill (name/address)

___ House Deed (current)

___ Current Car Registration (name/address preprinted)

___ Current Cable/Satellite TV (name/address)

___ Mortgage Statement

___ Current Car Insurance ID Card (name/address)

___ Current Telephone (name/address)

___ Notarized Landlord Affidavit
(See Office for form)

___ Current Car, Homeowner's or Renter's Insurance Binder/Bill

___ Current Credit Card (name/address)

___ Purchase Contract (must contain both the seller's and the purchaser's name and the address of the property to be purchased)

___ Lease Agreement (must be current, legal and valid between owner and renter, must contain the landlord's name, signature, address and phone number)

This documentation will be retained in the student's file along with other required documents. Your child(ren) **will not** be admitted to the District until this form has been received by the District Registrar and verified.

Parent/Guardian Signature

Date

Approved by: Signature

Date



Authorization for Release or Transfer of Student Records

Student Name: _____
Grade: _____ **DOB:** _____

Student Name: _____
Grade: _____ **DOB:** _____

Student Name: _____
Grade: _____ **DOB:** _____

Former Address:

New Address:

SEND RECORDS TO:

_____ **Pieter B. Coeymans Elementary**
66 Church Street
Coeymans, NY 12045
(p) 518-756-5200 Ext: 4000
(f) 518-756-9162

_____ **Albertus W. Becker Elementary**
1146 Route 9W
Selkirk, NY 12158
(p) 518-756-5200 Ext: 5000
(f) 518-767-2512

Dear Sir or Madam:
The above named student has enrolled in our school. We would appreciate copies of the following records concerning this student:

- Academic Records (Transcript/Report Card)
- Standardized test scores
- Discipline Records
- Attendance Records
- Health
- Psychological (CONFIDENTIAL)
- Individual Education Plan(CONFIDENTIAL)
- Other: _____

I hereby certify that I have been advised of the transfer of all school records regarding my child. I understand that I may examine the records and request a copy.

Signature of Parent/Guardian

Date

Please Note:
According to Section 99.31 of the Family Education Rights and Privacy Act (also known as the Buckley Amendment), dated June 17, 1976, it is no longer necessary to obtain written consent to release records between schools within New York State.

OFFICE USE ONLY:
Request for records sent on: _____
Records received from school on: _____