Data Change Form (<u>Signature Required</u>)

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:					
Feacher:	Classroom Location:				
s student currently receiving bus tran	sportation? Yes No				
Release/Emergency Contact Informa	ation Change: (Must be at	least 16 years old)	\checkmark	\checkmark	
ADD Contact			Release	Emergency	
First/Last Name	Relationship to Student	Cell Phone	-		
First/Last Name	Relationship to Student	Cell Phone	-		
REMOVE Contact			√ Release	Emergency	
First/Last Name	Relationship to Student	Cell Phone	-		
First/Last Name	Relationship to Student	Cell Phone	-		
ADDRESS CHANGE ONLY: (Must pro	vide new proof of address)				
Home Address:					
This change of address results in the fa	amily living in: (Please choos	e one of the following)			
a shelter a motel/hotel	temporarily with more t	han one family because of econ	omic hardshi	р	
regular housing (apartment, house,	mobile home, etc.)				
PHONE CHANGE:					
Mother's Phone: (Change/Add)] Cell		ther's Phone: (Change/Add) Cell Work Home			
Additional Comments/Changes:					
-					

Parent/Guardian Signature	Date	Phone
Early Childhood Staff Use Only:		Updated PIR
Change Verified by:		Updated Neighborhood School
Changes made to Child Plus (date):	Initials:	

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 GED No Diploma Last Grade Completed:				
Guardian #1 Current Employment Status:				
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				
Guardian #2 Current Employment Status: Full-time Part-time Seasonal Unemployed Student Student				
Are there protective orders? Yes No If so, please provide a copy.				

Please list all living in the household:

Full Name	Relationship to child	Date of Birth	School (if applicable)	Financially supported by guardian? (Y/N)