District Registrar 518.237.4131 ext. 2299 Fax: 518.833-7009 registrar@cohoes.org



Change of Information

Chang	C OI IIIIOIIII	<u>at1011</u>		
Student Name	Grade	Date of Birth	School	
			_	
Please fill out only information Ch	that needs to be eck all that apply	_	l/amended	
Change of Custody (Legal documentation Description:	-			
Add/Update Student Contact				
Name:	Relationship:			
Address:		Phone:		
Change of Address (Proof of residency mu	ust be provided)	□Rent □Own	☐Temporary ☐Other	
New Address:				
New Address: Street Ap	t# or Floor C	ity State	Zip Home Phone	
Please check one of the following to describe In permanent housing In a S In a car, park, bus, train, or campsite *When you move within the Cohoes City S with Proof of Residency for the	Shelter "D" e "Other School District, ye	oubled-up"	provide the school district	
If you own a Home:		If you are renting:		
Deed or Tax Bill –ALONG with one of the following:		ROP – Or provide 2 forms from below.		
Electric Bill within 30 days	Documents iss	Documents issued by the federal, state or local agencies		
Drivers' License		Electric Bill within 30 days		
Mortgage Statement		A signed Lease agreement		
Paystub	- 0	Paystub		
I ajotal	T Wy occas			
Parent or Guardian Signature:			Date:	

PLEASE NOTE: Changes will not be made in our Student Information System until proper documentation is received and recorded.