

# Colstrip Public Schools

## Change Form- Address/Phone/Household/Email

This form should be used to notify Colstrip Public Schools of any changes to your address, email, phone number or family members.

1. Requested by (Your First and Last Name) \_\_\_\_\_

2. Student Name(s)

3. Current Grade(s)

4. Reason for Address Change

- Student AND family moved to NEW address.
- Student AND family moved to Temporary address.
- Student AND family moved Out of District.
- Parent moved, student living elsewhere.
- Other (Please describe below)

5. Current/New Address (Complete if Address Change)

6. List all members and their relationship to the STUDENT(s) that will reside at the new address.  
(Complete if address change or household members changed.)

7. Effective date of Address Change

8. Home/Cell/Work Phone (Complete if Adding or Changing)

9. Email Address (Complete if Adding or Changing)

10. Emergency Contact Change (Please list Name along with Contact numbers)

Signature (Parent/Guardian)

PLEASE CONTACT ROBIN NANSEL AT 406-748-4699 EXT 4131 FOR NEW BUSING INFORMATION IF THIS IS AN ADDRESS CHANGE. THANK YOU!