

**Gwinnett County Public Schools**  
**K-12 STATUS CHANGE FORM**

SCHOOL TO MAINTAIN A COPY IN THE PERMANENT RECORD FILE ALONG WITH ORIGINAL ENROLLMENT FORM

**STUDENT INFORMATION**

*Please print all information on this form*

Date of Change \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(MM) (DD) (YYYY)

Student Name \_\_\_\_\_  
(Last Name) (First Name) (Middle Name) (Suffix)

Grade \_\_\_\_\_ Preferred Name at School \_\_\_\_\_ Birth Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(MM) (DD) (YYYY)

Parent/Guardian phone number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Home Cell Work

New Home Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

New Mailing Address (if different than home address) \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

**ENROLLING PARENT/GUARDIAN INFORMATION**

*If different from initial enrollment form*

Parent/Guardian \_\_\_\_\_  
(Last Name) (First Name) (Middle Name) (Suffix)

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent/Guardian phone number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Home Cell Work

