

**SCHOLAR DATA UPDATE(S)**

Please PRINT



**ADDRESS & CONTACT INFORMATION CHANGE**

Date: \_\_\_\_\_

Child's Name: (If more than 1, please list all)	Child's Grade: (If more than 1, please list all)

☐ **NEW PHONE**

☐ **NEW ADDRESS**

☐ **TEMPORARY ADDRESS**

*Please attach a copy of your proof of new address (SMUD, PG&E, or Rental Agreement) to this form.*

Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mobile Number: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION CHANGES**

*Note: The adults listed below are authorized to pick up and care for the above-names scholar(s).  
Scholar(s) may be released to others with written or verbal authorization.*

Name 1: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name 2: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name 3: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print name of Parent/Guardian: \_\_\_\_\_