



Notification of Change to Student Details

Student's First Name: Student's Surname: :

Siblings (if changes also applicable):

For changes to medical information or custody arrangements, please see the Front Office for assistance.

Parent / Guardian Details

Name:	Name:
Phone Number:	Phone Number:
Email:	Email:
Work Location:	Work Location:
Work Phone Number:	Work Phone Number:

Address Details

Please Note: We require a proof-of-residence document to verify a change of address (e.g. utility bill, council rates notice, rental agreement).

More information can be found at www.education.sa.gov.au/enrolment > *Confirming enrolment to school or preschool* > *Proof of residence*

Residential	Name for correspondence:
	Address: Suburb:
Mailing	Name for correspondence:
	Address: Suburb:
Billing	Name for correspondence:
	Address: Suburb:

Emergency Contacts

1. Name: Relationship to Student: Phone:

2. Name: Relationship to Student: Phone:

I declare the information provided above is true and accurate.

Parent / Caregiver Name: Signature: Date: / / 20

Office Use Only:	Date changed on EDSAS: / /
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