

CHANGE OF STUDENT INFORMATION



Student Name: _____

Student ID: _____

Primary Contact Number for School Call Out System: _____

ONLY FILL OUT INFORMATION THAT IS BEING CHANGED OR ADDED

NEW Address Information Must Attach a Utility Bill	Mailing Address	Auxiliary Address (If Applicable)
Street		
City, State Zip		

OLD Address Information	Mailing Address	Auxiliary Address (If Applicable)
Street		
City, State Zip		

Parent/Guardian Info:	Father	Mother
Name:		
Home Phone Number:		
Cell Phone Number:		
Work Phone Number:		
Email:		

ADDITIONAL PEOPLE WHO HAVE PERMISSION TO PICK UP STUDENT FROM SCHOOL:

Relation (i.e. grandparent)	Name	Phone Number

PLEASE REMOVE THE FOLLOWING NAME(S) FROM MY STUDENT CONTACT:

Relation (i.e. grandparent)	Name	Phone Number

X _____

Parent/Guardian Signature

Please attach a copy of your current utility bill (water, gas, or electric) and/or current lease for address change.

All changes requires : Copy of a government issued ID , signed form and submit to GRHS registrar's office for processing.

GRHS Registrar's Office contact information: Phone: 832 223 4200 Fax: 832 223 4233