



Change in Status Form
 2009-2010 School Year

Please complete all application information and return to your child's school.

STEP 1: BASICS

Student Name: _____

Date of Birth: _____

Daytime Phone Number: _____

Program:

- 3 Yr Old Preschool
- 4 Yr Old Preschool
- Kindergarten

STEP 2: CHANGES Please check all changes below that apply.

My child will NOT be attending a DPS school. He/she will be attending: _____

My child would like to attend a different DPS school/program.

School name: _____ Full Day _____ Half Day _____

Number in Household: The revised total number of people in my child's household: _____

Household Income:
 Revised Total Household Income (before taxes)* Monthly _____ Annual _____

*Must provide verification for **1 month's income for each parent/guardian**. Verification must include a copy of **ONE** of the following:

a. Most current check stub(s) (or)

Stub(s) must be for a period within 6 months of submittal AND must be for 1 entire month of income.

- If paid weekly, 4 consecutive pay stubs with dates showing each **1-week** pay period
- If paid twice a month, 2 consecutive pay stubs with dates showing each **2-week** pay period
- If paid once a month, 1 pay stub with dates showing a **full month**

b. 2008 tax return, W-2(s) (or)

c. A letter from an employer on company letterhead stating pay rate, hours worked each week and a business phone number and contact name

STEP 3: SIGNATURE & DATE Please read the following statement and sign where indicated.

I certify that all of the above information is true and correct and that all income is reported. I understand this information is being given for the receipt of the Federal and State funds, that school officials may verify the information on the application, and that deliberate misrepresentation of the information may subject me to prosecution under Federal and State Laws.

Print Name of Parent(s)/Guardian(s)

Signature of Parent(s)/Guardian(s)

Date

OFFICE USE ONLY

Date Form Received: _____ Copy to Parent/Guardian Yes ___ No ___

Form Received By: _____ School Number: _____ Student ID#: _____