



## WALNUT HILLS HIGH SCHOOL CHANGE OF ADDRESS

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

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

Student Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

**NEW ADDRESS:**

---

---

---

Provide proof of your new address by providing one of the required documents from the list on the Enrollment Providing Residency page attached.

Documents are accepted by fax, email, or in person either by parent or child.

**Julie Holt, Registrar**

**Location: Office 2201**

**513 363 8546 office**

**513 363 8417 fax**

**[nashhoj@cps-k12.org](mailto:nashhoj@cps-k12.org)**