



Enrollment Department PO Box 452387 Grove Oklahoma 74345
P 918-787-5452 ext 6027 F 918-517-3586

ENROLLMENT DEPARTMENT CHANGE OF ADDRESS FORM

NEW MAILING ADDRESS

PHYSICAL ADDRESS

HOME TELEPHONE: _____

WORK TELEPHONE: _____

CELL PHONE: _____

E-MAIL: _____

TRIBAL ENROLLMENT NUMBER: _____

*TRIBAL CHILDREN @ ADDRESS: _____ ROLL #: _____

_____ ROLL #: _____

_____ ROLL #: _____

SUBMITTED BY: _____ DATE: _____

TRIBAL MEMBER SIGNATURE

*If change of address is being submitted for minor child or incompetent adult, please sign below:

SUBMITTED BY: _____ DATE: _____

Parent/Guardian

