



Winthrop Public Schools

NAME CHANGE

Name: _____

Name Change: _____

Position: _____

School: _____

ADDRESS CHANGE

Name: _____

Previous Address: _____

New Address: _____

School: _____

Please fill out and send the form to Beth Bailey (bbailey@winthrop.k12.ma.us),
Patty Hames (phames@winthrop.k12.ma.us) and Judi Buono
(jbuono@winthrop.k12.ma.us).