



Proof of Residency Form

Student Name: _____ Date of Birth: _____

Complete Street Address of Primary Residence:

Before a child can be enrolled, proof of residency must be established by presenting the minimum required number of documents from each of the following categories:

Category A – Any ONE document showing proper address is required from this category:

- | | |
|--|---|
| <input type="radio"/> Homeowner's most recent Tax Bill | <input type="radio"/> Letter from landlord and proof of last 2 months' payments (canceled checks or receipts required) |
| <input type="radio"/> Mortgage documents | <input type="radio"/> Notarized letter with explanation of living arrangements from the resident owner of property containing contact information for verification by the school. |
| <input type="radio"/> C.O. on a newly built home | |
| <input type="radio"/> Signed and dated lease and proof of last 2 months payment if lease is not at its inception (canceled check or receipts required) | |

Category B – Any ONE document showing proper address is required from this category:

- | | |
|---|--|
| <input type="radio"/> Driver's License | <input type="radio"/> Most recent cable or credit card bill |
| <input type="radio"/> Vehicle Registration | <input type="radio"/> Voter registration |
| <input type="radio"/> Auto Insurance policy | <input type="radio"/> Homeowner's/renter's insurance policy |
| <input type="radio"/> Current public aid card | <input type="radio"/> Utility bill (telephone bill NOT accepted) |

The following additional documents are also required to be submitted, if applicable:

- ☐ Any court order, judgments, decrees or other documents (e.g., joint agreements) awarding primary physical custody or granting guardianship of the student to any person.

I certify the facts set forth in this residency form are true and complete. I understand that providing misleading or false information about residency is a criminal offense.

Parent/Guardian Name: _____ Relationship to child _____

Signature: _____ Contact Phone # _____

Street Address of Parent/Guardian: _____

Notary's Signature & Date: _____

(Affix Seal)