

Proof of Residency Form

Student Name:	Date of Birth:	
Current Street Address: Number	& Street:	
Town:	State:	Zip Code:
Before a child can be enrolled, proof minimum required number of docum		be established by presenting the
Please provide <u>two</u> of the following of	documents showing	current address information:
 Letter from landlord and proof required) 	f of last 2 months particles from of living arrange at act information for the following from 60 days)	t (canceled check or receipt required) ayment (canceled check or receipt ements from the resident owner verification by the school.
I certify the facts set forth in this runderstand that providing mislead criminal offense.	-	-
Parent/Guardian Name:	Rela	tionship to child
Signature:	Conta	ct Phone #
Street Address of Parent/Guardian:		