



BLACKSTONE-MILLVILLE REGIONAL SCHOOL DISTRICT

200 Lincoln Street, Blackstone, MA 01504
(508) 883-4400 OPTION #9 508-876-0158 FAX LINE
Website: www.bmrtd.net

RESIDENCY VERIFICATION

We hereby state the following to be true:

_____, _____, resides at the home of
(Student's Name) (DOB)

_____, at _____ in the Town
(Home Owner) (Street Address)

_____, MA. _____ lives at this
(Student)

address _____% of the time. _____, will notify the
(Parent/Guardian)

Blackstone-Millville Regional School District if any of these arrangements should change.

Signed under pains and penalties of perjury:

(Parent/Guardian Signature) (Date)

(Home Owner's Signature) (Date)

Please indicate below any other students in the Blackstone-Millville Regional School District:

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____