

HIGH SCHOOL STUDENT RESIDENCY VERIFICATION FORM AND AFFIDAVIT
VEAZIE SCHOOL DEPARTMENT

PART 1. STUDENT INFORMATION

Today's Date: _____, 20__

Use a separate form for each student.

Student's Full Name: _____

Date of Birth: _____ **Entering Grade:** _____

IEP: ___ Yes ___ No **504 Plan:** ___ Yes ___ No

Last School Attended: _____

Student Accepted by: _____

(Print name of high school of choice)

Student Lives With:

(CHECK ONE BOX)

Please Provide Supporting Documents

(ie. Birth Certificate, Legal Court Documents, etc.)

_____ Both parents in single household

_____ Mother

_____ Father

_____ Foster Parents

_____ Relative (please specify) _____

_____ Other (please explain) _____

_____ Shared Custody (please explain) _____

PART 2. PARENT/LEGAL GUARDIAN INFORMATION

Attach extra sheets if the student has more than two parents/legal guardians. Note: A "power of Attorney" is not a "Guardian" for student residency purposes.

Parent/Legal Guardian 1:

Full Name: _____

Physical Address: _____

(Where you actually live)

Mailing Address: _____

(If different from above)

Home or Cell Phone: _____ Work Phone: _____

E-mail Address: _____ Full-time activity military: ___ Yes ___ No

Parent/Legal Guardian 2:

Full Name: _____

Physical Address: _____

(Where you actually live)

Mailing Address: _____

(If different from above)

Home or Cell Phone: _____ Work Phone: _____

E-mail Address: _____ Full-time activity military: ___ Yes ___ No



PART 3. AFFIDAVIT OF PARENT/LEGAL GUARDIAN

➔ Read and certify the statements below before a notary public. Notary service is available at the town office.

I certify that:

1. I am the legal parent/guardian of

_____ (Print Student's Full Name)

2. I reside at the following address:

I actually live at this address: I do not merely own or rent property there. I understand that, for student residency purposes, I cannot have more than one residence at any given time.

3. I understand that, if it is determined that I do not actually live at this address or if I provide misleading or false information about my residence to Veazie School Department, I will be responsible for all costs incurred for educational services provided to my child.
4. If any residence changes, I will immediately notify Veazie School Department.
5. I understand that, even if my child is eligible to attend school at the Veazie School Department's expense, Veazie School Department will not pay for room and board.

I do swear or affirm under penalty of perjury* that all statements made herein are true and based on my personal knowledge.

Dated: _____, 20____ Signature of Parent/Legal Guardian (**sign in the presence of a Notary**)

Printed Name: _____

Signature of Notary Public: _____

Name of Notary Public: _____

Notary Public, State of Maine

SEAL

My commission expires : _____

*** Under Maine Law, intentional falsehoods made under oath or affirmation before a person qualified to take oaths or affirmations may be punishable as false swearing, a class D crime.**

PART 4. PROOF OF RESIDENCY - ATTACH TWO RESIDENCY AND ONE GUARDIANSHIP:

- | | |
|-----------------------------|--|
| -Property tax bill | -Separation agreement, divorce judgement, or parental rights and responsibilities judgement |
| -Rental agreement | -A court order identifying my residence, the primary residence of my child, or the allocation of parental rights and responsibilities among the parent/legal guardians of my child |
| -Motor vehicle registration | -Birth Certificate |
| -Driver's license/State ID | -Other (please specify): _____ |
| -Hunting or fishing license | |
| -Utility bills | |
| -Property insurance | |

VEAZIE SCHOOL DEPARTMENT MAY REQUIRE THAT YOU PROVIDE ADDITIONAL PROOF OF RESIDENCY.