

## **AFFIDAVIT OF RESIDENCE**

Family living with a Homeowner or Apartment Lessee

| The undersigned, first being duly sw        | vorn, deposes      | and states that      | he/she is t    | the parent/guardian of      |
|---|--------------------|----------------------|----------------|-----------------------------|
|   | and said s         | tudent lives with    | the undersi    | gned, and that both the     |
| STUDENT'S NAME                              |                    | tadent nves with     | the undersig   | Sirea, and that both the    |
| student and the undersigned are bona fic    | de full time resid | ents of New Haver    | n, Connecticu  | it and that they reside at: |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
| STREET ADDRESS                              | CITY               |                      | STATE          | ZIP                         |
|   |                    |                      |                |                             |
| With:                                       |                    |                      |                |                             |
|   | NAME OF HOMEOV     | VNER/APARTMENT LESSE | E              |                             |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
| The undersigned further agrees that he/     | •                  |                      |                | •                           |
| student ever terminate the above reside     | ence in New Hav    | en while the stud    | ent is enrolle | ed in a New Haven Public    |
| School; and that the information on this do | cument may be ι    | used in ANY hearing  | or court of la | w as evidence against me.   |
|   |                    |                      |                |                             |
| IF INFORMATION CONCERNING RESIDENCY         | PROVES TO BE II    | NVALID OR FRAUDU     | JLENT, MY CH   | IILD WILL BE WITHDRAWN      |
| FROM SCHOOL IMMEDIATELY AND I SHALL         | L BE ASSESSED T    | UITION AND MAY I     | BE PROSECUT    | ED UNDER THE CRIMINAL       |
| STATUTES OF THE STATE OF CONNECTICU         | JT. THE BOARD      | OF EDUCATION SH      | ALL SEEK TO    | RECOVER SUCH TUITION        |
| THROUGH ALL AVAILABLE CIVIL REMEDIES.       | <u>.</u>           |                      |                |                             |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
| SIGNATURE OF PARENT / GUARDIAN              |                    | SIGNATURE OF H       | OMEOWNER/APA   | ARTMENT LESSEE              |
|   |                    |                      |                |                             |
| NAME OF PARENT/GUARDIAN (PLEASE PRINT)      |                    | NAME OF HOME         | OWNER/APARTM   | ENT LESSEE (PLEASE PRINT)   |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
| Sworn to and subscribed before this         | day of             |                      | , 20           | ·                           |
|   |                    |                      |                |                             |
|   |                    |                      |                |                             |
| NOTARY PUBLIC                               |                    | COMMISSION EX        | DIDATION DATE  |                             |
| NOTANT PUBLIC                               |                    | COMMUNICATION EX     | FINATION DATE  |                             |
|   |                    |                      |                |                             |

YOU MUST SIGN IN THE PRESENCE OF A NOTARY - DO NOT SIGN IN ADVANCE.

PURSUANT TO CONNECTICUT GENERAL STATUE, SECTION 10-186, THE PARTY CLAIMING ELIGIBILITY FOR SCHOOL ACCOMMODATIONS SHALL HAVE THE BURDEN OF PROVING SUCH ELIGIBILITY BY A PREPONDERANCE OF EVIDENCE.

When using this form, you must bring photo identification and acceptable documents from the list below bearing the name of the person who signed above as the owner of the house or lessee of the apartment in order to register.

## **ACCEPTABLE DOCUMENTATION**

- 1. Copy of home mortgage statement or an apartment lease showing name of the lessee and tenant(s) with landlord name and phone number
- 2. Current utility bill (gas, electric, phone or water)

**UPDATED JUNE 2020**