

**SHELTON PUBLIC SCHOOLS
SHELTON, CONNECTICUT**

Verification of Residence

NEW ENROLLEE/STUDENT TRANSFER/CHANGE OF ADDRESS *(within Shelton)*

Parent/Legal Guardian Statement

I (print name) _____ the parent or legal guardian of (name) _____
(address) _____ certify that the above named student actually lives full time
(typically 7 days per week) at the above address. The telephone number at the same address is _____
and the telephone number in an emergency is _____. **Grade** _____

This information and the documents provided are accurate. I authorize representatives of the Shelton Public Schools to verify this information, and I understand falsification of any information or documents required for this verification will result in revocation of registration for the student, and may lead to liability for tuition and to criminal penalties for fraud.

Parent/Guardian Signature: _____ Date: _____

For Transfers only

Current School *(send records)* _____ **New School** _____

FOR OFFICE USE ONLY

In order to verify district residence, the child over 18, parents or guardians, or an emancipated minor must sign above and provide documents from any of the items listed below.

- ___ 1. Copy of two of the following at address within the district in the parent's or guardian's name:
 - ___ a. Deed to home or dated rental agreement showing student(s) name
 - ___ b. Escrow papers or signed mortgage commitment
 - ___ c. Current utility or telephone bills (land line only)
 - ___ d. Notarized letter from landlord or owner acknowledging parent/guardian's and student's residence
- ___ 2. S:1A to be filled out by person with whom family and student reside. Verification visit by Residency Confirmation staff will follow; **child may attend school.**
- ___ 3. Verification visit by Residency Confirmation staff (for situations not covered by 1 and 2); **child may not attend school until complete.**

Documents seen by: _____ on _____