

Stafford Public Schools

Stafford Springs, CT 06076

Residency Affidavit
Confidential

The Stafford Board of Education, in compliance with statute 10-253(d) of the State of Connecticut, requires that this form be completed by the parent/guardian for any student who claims residence in Stafford if 1) the parent/guardian is unable to provide the standard Proof of Residency documents; 2) the child is not residing with the parent/guardian; or 3) there is a question about a child's actual residence.

This form **must be notarized** and submitted along with any other Proof of Residency documents required by Stafford Public Schools.

***Please complete all applicable sections.**

Date: _____

1. Student's Name _____ DOB: _____
(Last) (First) (Middle)

2. Student's Address _____
(No. and Street) (Town) (State) (Telephone No.)

3. Name of Person with whom Student Lives _____
Relationship _____
Address _____
(No. and Street) (Town) (State) (Telephone No.)

4. Name of Student's Father/Guardian _____
Father/Guardian Address _____
(No. and Street) (Town) (State) (Telephone No.)

4. Name of Student's Mother/Guardian _____
Mother/Guardian Address _____
(No. and Street) (Town) (State) (Telephone No.)

6. Date Student Moved to Stafford _____
(Month) (Day) (Year)

7. Student's Former Address _____
(No. and Street) (Town) (State)

8. Former School _____ Grade _____

9. Name and Address of Students Court Appointed Legal Guardian (if applicable):

Witness (Notary Public)

Date

Signature of Parent

Date

PARENT/GUARDIAN STATEMENT

I hereby certify that _____ is my _____
(Student's Name) (Relationship)

and he/she resides with _____ who is _____
(Name of Person/Host) (Relationship)

at _____
(No. Street) (Telephone No.)

I further certify that this is intended to be a bona fide permanent address at which my child will be living for _____ days and _____ nights per week and that I am not providing payment for having my child reside with _____
(Name of Person/Host)

I further certify that my son/daughter is living at this address and/or not living with me because

PARENT/GUARDIAN PERMISSION STATEMENT
(To be completed if child is not residing with parent/guardian)

In my absence, I hereby certify that _____ has
(Person's Name/Host)

full right to act in my child's behalf in my absence concerning any and all school disciplinary, administrative, and medical matters.

As a parent/guardian of the student named on this form, and as a nonresident of the Town of Stafford, CT, I attest to the accuracy of the information contained in this form. Further, I certify that, as a permanent resident of Stafford, CT, the student is eligible for free public school privileges from the Stafford Public School District. I agree to notify school officials immediately regarding the termination of the student's permanent residency in Stafford, in which event the student will no longer be eligible for free public school privileges in the Stafford Public School District. **Finally, I understand that, should the student be found to be attending Stafford Public Schools illegally, the Stafford Board of Education reserves the right to recover the costs for such education from me, the undersigned. The current tuition cost is \$ _____ per year.**

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut. I also understand that this document may be used in a court of law as evidence against me.

Witness (Notary Public)

Date

Signature of Parent

Date

CONFIDENTIAL

HOST'S STATEMENT

**(To be completed if child resides with another individual(s)
in the Town of Stafford)**

The Stafford Board of Education, in compliance with statute 10-253(d) of the State of Connecticut, requires this form to be completed for any student who is **residing with another individual(s) (i.e. host)** within Stafford. This section of the Residency Affidavit must be completed by the individual(s) with whom the student resides, regardless of whether the parent/guardian may also be residing with the host family at the same address. Per the Stafford Public School District's residency requirements, Proof of Residency documents confirming the host's permanent address in the Town of Stafford are also required.

I hereby certify that _____ is my _____
(Student's Name) (Relationship)

and that he/she legally resides with me at _____
(No. and Street)

_____ I further certify that this is intended as a bona fide permanent address, that this child will be living with me ___ days and ___ nights per week, and that I am not receiving payment for having this child reside with me.

I certify that this child is residing with me because _____

As the host of the student named on this form, and as a resident of Stafford, CT, I attest to the accuracy of the information contained in this form. Further, I certify that, as a permanent resident of Stafford, the student is eligible for free public school privileges from the Stafford Public School District. I agree to notify school officials immediately regarding the termination of the student's permanent residency in Stafford in which event the student will no longer be eligible for free public school privileges from the Stafford Public School District. **Finally, I understand that, should the student be found to be attending Stafford Public Schools illegally, the Stafford Board of Education reserves the right to recover the costs of such education from me, the undersigned. The current tuition cost is \$ _____ per year.**

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut.