

# Woodridge Local School District

## RESIDENCY VERIFICATION (GOOD FOR ONE (1) YEAR ONLY)

This form must be completed, in the presence of the staff member enrolling the student, whenever a parent cannot verify that s/he owns or rents a residence in the District.

Student's Name \_\_\_\_\_

School \_\_\_\_\_

Parent's Name \_\_\_\_\_

Although I do not own or rent a residence in the District, this is to certify that I am the custodial parent of my child named above and our current permanent residence is

\_\_\_\_\_  
Street address

where we are living as guests of

\_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone

who ( ) own ( ) rent this residence.

Should I change this, my permanent residence, I understand that my child may no longer be eligible to attend school in the District. I promise to notify the school immediately if my residence changes.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
School District Witness

\_\_\_\_\_  
Date

I certify that the above information is correct and the above named student(s) currently reside in my home.

\_\_\_\_\_  
Signature of Residence Owner/Renter

\_\_\_\_\_  
Date

\*\*\*\*\*

SWORN TO BEFORE ME and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date