

## STUDENT RESIDENCY VERIFICATION FORM AND AFFIDAVIT

### PART 1. STUDENT INFORMATION

Today's Date: \_\_\_\_\_, 20\_\_

*Use a separate form for each student.*

Student's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Entering Grade: \_\_\_\_\_

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 active duty 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 active duty military?  Yes  No

**PART 3. AFFIDAVIT OF PARENT/LEGAL GUARDIAN 1**

Read and certify to the statements below before a notary public.

**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 RSU 63, the right of my child to attend school at RSU 63's expense will be terminated and I will be responsible for all costs incurred by RSU 63 for all educational services provided to my child.
- 4. If my residence changes, I will immediately notify the Superintendent of RSU 63.
- 5. I understand that, even if my child is eligible to attend school at RSU 63's expense, RSU 63 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  
Print name: \_\_\_\_\_

*\* 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.*

Sworn to and subscribed before me, this \_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Maine  
Print name: \_\_\_\_\_  
My commission expires: \_\_\_\_\_

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

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

RSU 63 MAY REQUIRE THAT YOU PROVIDE ADDITIONAL PROOF OF RESIDENCY.

**PART 3. AFFIDAVIT OF PARENT/LEGAL GUARDIAN 2**

Read and certify to the statements below before a notary public.

**I certify that:**

6. I am the legal parent/guardian of \_\_\_\_\_  
(Print Student's Full Name)

7. 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.

8. 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 RSU 63, the right of my child to attend school at RSU 63's expense will be terminated and I will be responsible for all costs incurred by RSU 63 for all educational services provided to my child.

9. If my residence changes, I will immediately notify the Superintendent of RSU 63.

10. I understand that, even if my child is eligible to attend school at RSU 63's expense, RSU 63 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  
Print name: \_\_\_\_\_

*\* 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.*

Sworn to and subscribed before me, this \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
\_\_\_\_\_  
Notary Public, State of Maine  
Print name: \_\_\_\_\_  
My commission expires: \_\_\_\_\_

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

- Property tax bill
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- Birth Certificate
- Other (please specify): \_\_\_\_\_

RSU 63 MAY REQUIRE THAT YOU PROVIDE ADDITIONAL PROOF OF RESIDENCY.

**PART 5. RSU 63 DETERMINATION OF STUDENT ELIGIBILITY**

*To be completed by the Superintendent upon receipt of all applicable Residency Verification Forms, Affidavits and proof of residency.*

In reliance on the Student Residency Verification Form(s) and Affidavit(s), including proof of residency, submitted by the parent(s)/legal guardian(s) of \_\_\_\_\_

(Print Student's Full Name)

and other relevant information, if applicable, available to me, I have determined that the student:

- IS NOT ELIGIBLE to attend his/her designated high school of choice at the expense of RSU 63.
- IS ELIGIBLE to attend his/her designated high school at the expense of RSU 63. I hereby authorize RSU 63 to pay the allowable tuition for the school year 20\_\_\_\_ - 20\_\_\_\_ (beginning on \_\_\_\_\_)to the student's designated high school in accordance with 20-A M.R.S. §5203(4) and applicable school policy.

RSU 63 reserves the right to revoke, reverse or modify this determination of student eligibility at any time. Nothing herein relieves the parent(s)/legal guardian(s) of the promises, oaths and affirmations made as part of the Student Residency Verification Form and Affidavit.

Dated: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Superintendent of Schools  
Regional School Unit No. 63