STUDENT / PUPIL AFFIDAVIT FOR PURPOSE OF RESIDENCY

STATE OF CONNECTICUT)
) ss: Madison
COUNTY OF NEW HAVEN)

1. I currently reside with _____
(name of local resident)

at _____ in the town of Madison, CT.
(address)

2. I intend such residence to be permanent.
3. I intend such residence to be provided without pay and such residence is provided without pay.

_____ _____
Student Date

IT IS A VIOLATION OF CONNECTICUT CRIMINAL STATUTE, CGS 53a-157, TO MAKE FALSE WRITTEN STATEMENT. THE MADISON PUBLIC SCHOOLS SECURITY SERVICES STAFF AND MADISON POLICE SERVICES ASSIST THE BOARD OF EDUCATION IN INVESTIGATIONS OF STUDENT RESIDENCY CLAIMS.

Subscribed and sworn to before me this _____ day of _____, 20____.

_____, My Commission expires _____, 20____.
Notary Public

If you have any questions regarding this form please contact Madison Public Schools at (203)245-6300.

Revised 01/2022