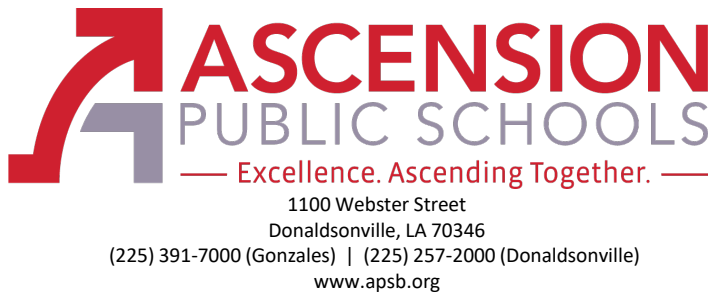


David Alexander
Superintendent

Taft Kleinpeter
Board President
District 5B

Troy Gautreau, Sr.
Vice President
District 7A



Robyn Penn Delaney, District 1
Scott Duplechein, District 2
Julie Blouin, District 3
Marty J. Bourgeois, District 4A
John Murphy, District 4B
John DeFrances, District 5A
Jared Bercegeay, District 6A
Louis Lambert, District 6B
Patricia Russo, District 7B

PROOF OF RESIDENCY REQUIREMENTS AFFIDAVIT CHECKLIST

I. Requirements for Residents Needing an Affidavit: Parent or Court Appointed Guardian or Individual Verifying Student Residence

A parent/court appointed custodian-guardian who is residing with a relative or friend on a temporary or permanent basis must complete the official Ascension Parish School Board **Affidavit of Place of Residence** document.

Parent/Guardian Required Documents:

- _____ A valid Louisiana driver's license with current address **or**
- _____ An official Louisiana picture ID with current physical address

and

The **Parent/Guardian** must also provide at least **two (2)** of the documents listed below with current address indicated:

- _____ Voter Registration Card (not verification form) – must have municipal address located in Ascension Parish
- _____ Food Stamp Verification Form or website letter
- _____ Health Insurance/Medicaid letter (current and original, no photocopies)
- _____ Social Security Insurance Letter (current)
- _____ Signed Letter from Employer on Company/Business Letterhead
- _____ Confirmation letter from Post Office – must indicate change of address

II. Requirements for Person With Whom You Reside: Individual Verifying Student Residence

The following documents must be provided for the person with whom you reside:

- _____ A Utility Bill (**Electric or Gas Only**) with current physical address
 - _____ A Valid Driver's License or Official Picture ID with current physical address
- *If Leasing or Renting AND Utilities Are Not In the Individual Verifying Student Residence Name, You Must Also Provide**
- _____ Rental or Lease Agreement on property at the address listed on the Affidavit by Individual verifying student residence

**Residency Verification May Be Requested At Any Time During the
School Year by the Ascension Parish School Board**

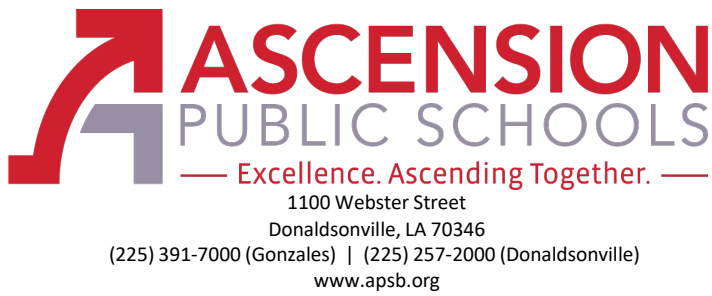
Reviewed with Parent: _____
(School Employee Initials)

March 2022

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**AFFIDAVIT BY PARENT/COURT APPOINTED GUARDIAN
 VERIFYING STUDENT RESIDENCE**

PARENT/GUARDIAN OF STUDENT: _____

1. Name of child/student: _____ D.O.B.: _____

2. School being enrolled in: _____ Bus Rider _____ Car Rider _____

3. School last attended: _____

4. Other children of parent/guardian living with Custodial Resident:

Name	Age	Grade	Name	Age	Grade

5. Parent/guardian/student reside with the following: Custodial Resident: _____

Physical Address	City	Zip Code

6. Parent/guardian/student's previous address:

Physical Address	City	State	Zip Code

7. Enrolling parent/guardian:

I, _____, attest that my child/student and I are **living with and physically reside** with the custodian at the custodian's address **at least five (5) days and five (5) nights per week**.

The parent/guardian has been advised and is aware that the making of **intentionally false statements** in this Affidavit may expose **him/her and the residence owner** to prosecution for false swearing under R.S. 14:125 or other laws of the State of Louisiana.

I have carefully read and signed this Affidavit and attest to the truth of all of the information provided.

THUS SWORN AND SUBSCRIBED BEFORE ME, the undersigned Notary Public, with such civil and criminal penalties that may attach hereto this _____ of _____ 20____.

Witness

Parent/Court Appointed Guardian

Witness

NOTARY PUBLIC

Printed Name of Notary: _____

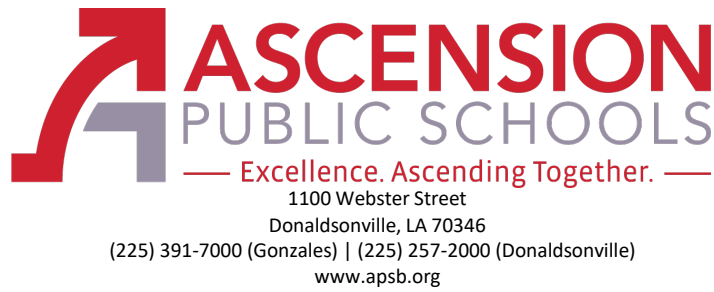
Number: _____

PARISH OF ASCENSION
STATE OF LOUISIANA

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Board President
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AFFIDAVIT BY CUSTODIAN (WITH WHOM YOU RESIDE) VERIFYING STUDENT RESIDENCE

1. I, _____ (check one below)
- _____ Own a Home _____ Rent/lease an apartment or home
- _____ The party named below lives with me at the address given below:

Physical Address	City	State	Zip Code
------------------	------	-------	----------

2. I have resided at this address for _____ (years / months).
3. Name(s) of Parents or Guardian residing in home _____
- _____
4. Name(s) of school-aged child(ren) residing in the home _____
- _____

I understand that this statement is being made in order to provide residency so that the above-named child(ren) may attend school in this district. I also attest that the living arrangement is **not solely for the purpose of establishing school attendance eligibility**. I further attest that the parent/guardian and child(ren) listed above reside with me at this residence **at least five (5) days and five (5) nights per week**.

I have been advised and am aware that the **making of intentionally false statements in this Affidavit may expose me to prosecution for false swearing** under **R.S. 14:125** or other laws of the State of Louisiana.

I have carefully read and signed this Affidavit and attest to the truth of all of the information provided.

THUS SWORN AND SUBSCRIBED BEFORE ME, the undersigned Notary Public, with such civil and criminal penalties that may attach hereto this _____ day of _____, 20_____.

Witness

Custodian

Witness

NOTARY PUBLIC

Printed name of Notary: _____ Number: _____