



## REGISTRATION PACKET CHECKLIST

Please note the following items are needed to officially enroll your child in a Plymouth Public School. These items need to be returned to the school and verified prior to your child being admitted to any school in our district. For students enrolling at the Middle School or High School, you must call the school to set up a meeting with a School Counselor.

\_\_\_\_\_ Copy of Birth Certificate

\_\_\_\_\_ Verification of Residence Form

\_\_\_\_\_ Proof of Residency:        +        \_\_\_\_\_ Utility Bill        +        \_\_\_\_\_ Driver License

Section 1 (a, b, or c)

\_\_\_\_\_ a. Property Statement

\_\_\_\_\_ b. Escrow papers or signed mortgage commitment

\_\_\_\_\_ c. Notarized letter from landlord or owner acknowledging parent/guardian's and student's residence

**OR**

Section 2

\_\_\_\_\_ Certificate of Residency (if applicable)

**OR**

Section 3

\_\_\_\_\_ Residency Affidavit (if applicable)

\_\_\_\_\_ Host's Statement (if applicable)

\_\_\_\_\_ Parent Statement (if applicable)

\_\_\_\_\_ Permanent Registration Form (3 pages) **The entire Registration Packet must be completed in full.**

\_\_\_\_\_ Release of Student Information form

\_\_\_\_\_ Student Support Services form

\_\_\_\_\_ New Student Transportation Request form (even if you are not requesting transportation at the time of registration)

\_\_\_\_\_ SchoolMessenger – Communication System Form

\_\_\_\_\_ Free & Reduced Lunch Application (if applicable)

### **\*\*The School Nurse Requires 4 items:\*\***

\_\_\_\_\_ Health/Medical Questionnaire

\_\_\_\_\_ **\*\*Health Assessment Record**

\_\_\_\_\_ **\*\*Part II – Medical Evaluation – Physical Form**

\_\_\_\_\_ **\*\*Immunization Record**

**\*\*A student will not be allowed to attend school until these are completed and on file with the school nurse. If you are NOT coming from another Connecticut school, you will need to have a State of Connecticut physical done within 30 days from the first day of enrollment.**

### **MISCELLANEOUS FORMS**

\_\_\_\_\_ Network/Internet Use Agreement (4 pages – please return page 4 signed by parent & student if applicable) supplied by school at the time of registration.

\_\_\_\_\_ Chromebook Student User Agreement and Parent Permission Form (please return page 5 signed) supplied by the school at the time of registration.



## Plymouth Public Schools

### Verification of Residence

#### NEW ENROLLEE/STUDENT TRANSFER/CHANGE OF ADDRESS

##### Parent/Legal Guardian/Host Statement

I (print name) \_\_\_\_\_ the parent/legal guardian/host of

(Name) \_\_\_\_\_ (Address) \_\_\_\_\_

certify that the above named student actually lives full time (typically 7 days per week) at the above address. The telephone number at the same address is \_\_\_\_\_ and the telephone number in an emergency is \_\_\_\_\_.

Grade \_\_\_\_\_

This information and the documents provided are accurate. I authorize representatives of the Plymouth Public Schools to verify this information. I understand that a perjured or fraudulent statement may lead to the disenrollment of the above named student(s) and may lead to my prosecution under the criminal statutes of the State of Connecticut, which is stated below. I also understand that this document may be used as evidence in a court of law.

Larceny 1<sup>st</sup> Degree 53a122 -- The property or service is obtained by defrauding a public community and such property exceeds \$2,000.

Class B. Felony -- not less than one year or more than 20 years and/or a fine up to \$10,000.

Parent/Guardian/Host Signature: \_\_\_\_\_ Date: \_\_\_\_\_

##### **For Transfers Only**

Current School (send records) \_\_\_\_\_ New School \_\_\_\_\_

##### **FOR OFFICE USE ONLY**

In order to verify district residence, the student over 18, parents, guardians, hosts, or an emancipated minor must sign above and provide documents from either #1 or #2 below.

\_\_\_\_ 1. Copy of one of the following at address within the district in the parent's, guardian's/host's or adult student's name and a current utility bill:

- \_\_\_\_ a. Property Statement/Deed to home or dated rental agreement showing student(s) name
- \_\_\_\_ b. Escrow papers or signed mortgage commitment
- \_\_\_\_ c. Notarized letter from landlord or owner acknowledging parent/guardian's and student's residence

Documents seen by: \_\_\_\_\_ on \_\_\_\_\_

\_\_\_\_ 2. Certificate of Residency or Residency Affidavits to be completed by person with whom family and/or student reside (host). Verification visit by Residency Confirmation staff may follow.

Verification visit completed by: \_\_\_\_\_ on \_\_\_\_\_.



## CERTIFICATE OF RESIDENCY

(Student and parent/guardian living in dwelling owned or rented and occupied by another person)

If the student and the parent/guardian are living in a dwelling that is rented or owned and occupied by another person, the person who owns or rents the dwelling must bring the required documentation, present photo identification and complete/sign Certificate of Residency form.

School: \_\_\_\_\_ School Year: \_\_\_\_\_

As part of our residency verification process, we are requesting that you as the owner/renter of the residence in Plymouth verify that:

Name of Student (s): \_\_\_\_\_

And Student (s) Parent / Guardian: \_\_\_\_\_

reside with me at \_\_\_\_\_  
Address, Apt/Unit #, Town

\_\_\_\_\_ certify that the above named student(s) and parents(s)/guardian(s) reside with me at the above listed address, in a residence owned or occupied by me in the Town of Plymouth. I realize that if I make a false statement as to residency, I may be held liable for a share of the cost for the education of the said student(s) if they, in fact, do not reside in Plymouth.

I agree that the living arrangement with the student and his/her parent/guardian is:

- Permanent
- Provided without pay and
- Not for the sole purpose of obtaining school accommodations

I agree to notify the school immediately regarding the termination of the student's full time physical presence (permanent residency) in the town of Plymouth in which event the student will no longer be eligible for free school privileges. Finally, I understand that should the student be found to be attending Plymouth schools illegally, the Town of Plymouth reserves the right to recover the costs of such education from me, the undersigned.

I understand that a perjured or fraudulent statement may lead to the disenrollment of the above named student(s) and may lead to my prosecution under the criminal statutes of the State of Connecticut which is stated below. I also understand that this document may be used as evidence in a court of law.

Larceny 1<sup>st</sup> Degree 53a122 -- The property or service is obtained by defrauding a public community and such property exceeds \$2,000.

Class B. Felony -- not less than one year or more than 20 years and/or a fine up to \$10,000.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Legal Resident of Plymouth, CT

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent / Guardian of Student(s)



PLYMOUTH PUBLIC SCHOOLS  
CENTRAL OFFICE  
27 NORTH HARWINTON AVENUE  
TERRYVILLE, CONNECTICUT 06786

## ***Plymouth Public Schools***

### ***Confidential***

### **Residency Affidavit**

The Plymouth Public Schools, in compliance with statute 10-253(d) of the State of Connecticut, requires this form to be completed for **any student who claims residence in Plymouth and is not residing with his or her parent(s) and whose parents are not residing in Plymouth**. This form is required when there is a question about the student's actual residence. The student, parent and person with whom the student is living must fill out this form together.

Date: \_\_\_\_\_

1. Student's Name \_\_\_\_\_ DOB: \_\_\_\_\_  
(last) (First) (Middle)

2. Student's Address \_\_\_\_\_  
(No. and Street)  
Telephone # \_\_\_\_\_

3. Name of Person With Whom Student Lives \_\_\_\_\_  
Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

4. Date Student Moved To \_\_\_\_\_  
Month Day Year

5. Student's Former Address \_\_\_\_\_  
No. & Street Town State

6. Former School \_\_\_\_\_ Grade \_\_\_\_\_

7. Name of Student's Father \_\_\_\_\_  
Father's Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_

8. Name of Student's Mother \_\_\_\_\_  
Mother's Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_

9. Name, Address, Telephone # of Student's Court Appointed Legal Guardian (if applicable) \_\_\_\_\_  
\_\_\_\_\_



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## PARENT'S/ADULT STUDENT'S STATEMENT

I hereby certify that \_\_\_\_\_ is my \_\_\_\_\_  
 \_\_\_\_\_ (Name) \_\_\_\_\_ (Relationship)  
 and he/she/I reside(s) with \_\_\_\_\_ who is \_\_\_\_\_  
 \_\_\_\_\_ (Name of Person) \_\_\_\_\_ (Relationship)  
 at \_\_\_\_\_  
 \_\_\_\_\_ (No. & Street Address) \_\_\_\_\_ (Telephone #)

I further certify that this is intended to be a bona fide permanent address at which the student will be living for \_\_\_\_\_ days  
 and \_\_\_\_\_ nights per week and that I am not providing payment for having the student reside with  
 \_\_\_\_\_.

### For Parents:

I further certify that my son/daughter is not living with me because \_\_\_\_\_  
 \_\_\_\_\_

### For Adult Students:

I certify that I am not living with my parents because \_\_\_\_\_

As a parent of the student and/or adult student named on this form, and as a nonresident of the Town of Plymouth, I attest to the accuracy of the information contained in this form. Further, I certify that, as a permanent resident of the Town of Plymouth, the student is eligible for free school privileges. I agree to notify school officials immediately regarding the termination of the student's permanent residency in the Town of Plymouth, in which event the student will no longer be eligible for free school privileges. Finally, I understand that, should the student be found to be attending Plymouth Public Schools illegally, the Plymouth Public Schools reserves the right to recover the costs for such education from me, the undersigned.

I also understand that this document may be used in a court of law as evidence against me.

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Adult Student Signature

\_\_\_\_\_  
 Date

OPTIONAL: I hereby certify that the said \_\_\_\_\_ has full right to act in my child's behalf  
 \_\_\_\_\_ (Person's name)  
 concerning any and all school disciplinary, administrative, and medical matters.

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Date

Witnessed by:

\_\_\_\_\_  
 Witness (Notary Public)

\_\_\_\_\_  
 Date



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## HOST'S STATEMENT

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

and that he/she resides with me at \_\_\_\_\_  
 (No. and Street)

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

I certify that this student is residing with me because \_\_\_\_\_  
 \_\_\_\_\_

As the host of the student named on this form, and as a resident of the Town of Plymouth, I attest to the accuracy of the information contained in this form. Further, I certify that, as a permanent resident of the Town of Plymouth, the student is eligible for free school privileges. I agree to notify school officials immediately regarding the termination of the student's permanent residency in the Town of Plymouth in which event the student will no longer be eligible for free school privileges. Finally, I understand that should the student be found to be attending Plymouth Public Schools illegally, the Plymouth Public School reserves the right to recover the costs of such education from me, the undersigned.

I also understand that this document may be used in a court of law as evidence against me.

**\*\* If you are the guardian of the student, please indicate the date and source of your authority.**

Date: \_\_\_\_\_ Authority \_\_\_\_\_

Optional: I, \_\_\_\_\_, understand that I have full  
 (Name of Person)  
 responsibility for this student concerning any and all school disciplinary, administrative, and medical matters.

\_\_\_\_\_  
 Host's Signature

\_\_\_\_\_  
 Date

Witnessed by:

\_\_\_\_\_  
 Witness (Notary Public)

\_\_\_\_\_  
 Date