

School Year: 20___- 20___

STUDENT RESIDENCY VERIFICATION AFFIDAVIT - FORM 2

Please complete this form if applicable and return it with your residency verification documents via email to the address below that corresponds with your child's school or by US mail. If you have students at multiple schools, please email each corresponding school.

TOWresidency@lbusd.org EMSresidency@lbusd.org

TMSresidency@lbusd.org

LBHSresidency@lbusd.org

This form is to be completed by parent(s)/guardian(s) who are "Co-Residents" residing in or sharing a residence in which you are not the primary owner/renter/lessee OR you do not have a lease/rental agreement. Please complete Section A or Section B accordingly.

<u>Section A</u> : Complete this section if you are living with another family and the lease/rental agreement or mortgage statement is not in your name. The <u>primary owner/renter/lessee</u> of this shared residence is required to complete this section and attach a copy of the following items and sign the declaration below:				
of the address listed on Form 1 of t listed on Form 1 reside in the prop Residency Verification Affidavit is	his Residency Verific perty listed on a full- true and correct. I by established by a R	cation Affidavittime basis. I f understand that esidency Verific	er/lessee) declare that I am the primary owner/lessee I declare that the parent(s)/guardian(s) and the further declare that all of the information provided home visitation and/or residency verification is ation Affidavit. I agree to notify the Laguna Beersons listed on Form 1 or myself.	ne student(s) rided in this s a part of a
my residency are true and correct co	opies of the original of amounts and/or acco	documents, and to ount numbers, wh	and that any and all copies of documents submit that any and all documents submitted have not hich is permitted for purposes of this Residency (6, 127)	been altered
Do not sign this form if any of the above of the student from the school and may le		-	alse information was provided may result in immedia	te withdrawal
Primary Owner/Renter/Lessee Signal		on Date	in the County of	·
Section B: Complete this section The Owner/Landlord of this reasonable.	•		in which no lease/rental agreement is ava to sign the declaration below:	ilable.
Form 1 of this Residency Verification the property listed on a full-time basis true and correct. I understand that he established by a Residency Verificant	on Affidavit. I declar s. I further declare that nome visitation and/o tion Affidavit. I agre	te that the parent at all of the infor r residency verifulate to notify the L	clare that I am the owner/landlord of the address (s)/guardian(s) and the student(s) listed on Form mation provided in this Residency Verification acceptation is a part of a periodic process to confirm aguna Beach Unified School District if there is the periodic process to periodic process to confirm the periodic process the periodic process to confirm the periodic process to con	Affidavit is n residency any change
Do not sign this form if any of the a withdrawal of the student from the school			e that false information was provided may result in al penalties.	ı immediate
	Executed o		in the County of	·
Owner/Landlord Signature		Date		
Admin Use:: Verified in Aeries	Initials	Date:	I:	S Rev. 3/2023