



# HAYWARD UNIFIED SCHOOL DISTRICT

## SHARED RESIDENCE AFFIDAVIT

This document is intended to address the McKinney-Vento Assistance Act. The information provided will help speed the enrollment process for the student.

Student: \_\_\_\_\_ (Male \_\_\_ Female \_\_\_)

Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_

I, \_\_\_\_\_, the parent/guardian of the above-named student, am sharing the residence of

\_\_\_\_\_/\_\_\_\_\_  
Name of primary resident Relationship

Located at \_\_\_\_\_  
Address Apt #

\_\_\_\_\_  
City Zip

Phone: (\_\_\_\_) \_\_\_\_\_ Cell phone or pager #: (\_\_\_\_) \_\_\_\_\_

This living arrangement is: Temporary \_\_\_\_\_ Permanent \_\_\_\_\_ Duration \_\_\_\_\_

My California driver's license or I.D card number: \_\_\_\_\_

**We/I hereby certify that the address as given for enrollment purposes is true and correct. We/I understand and agree that if it is determined that this information is false, We/I are in violation of state law. We/I further understand that if it is determined that a registered student is not a resident of the Hayward Unified School District and does not have a valid inter district permit allowing attendance, the student may be removed from the District immediately and will be denied services by the District.**

\_\_\_\_\_  
Parent/Guardian - Print Name and Sign Date

**TO BE COMPLETED BY PRIMARY RESIDENT**  
**INITIAL EACH BOX** to indicate your understanding and provide two (2) proofs of residency in your name. Acceptable proofs outlined in registration packet.

I am the primary resident of the property located at: \_\_\_\_\_

I attest that the student and parent listed above reside at the above residence.

**I declare under penalty of perjury under the laws of the state of California that the foregoing is true and correct.**

\_\_\_\_\_  
Primary Resident Signature Date Telephone