



HACIENDA LA PUENTE UNIFIED SCHOOL DISTRICT Shared Residency Affidavit

This form is to be completed if proof of residency verification cannot be provided due to the fact that the parent and child(ren) are sharing a home with another person full time. This affidavit must be re-certified annually.

To be Completed by Parent(s)/Guardian(s):

Student(s)	Last Name	First Name	Date of Birth / /	Sex	Grade
	Last Name	First Name	Date of Birth / /	Sex	Grade
	Last Name	First Name	Date of Birth / /	Sex	Grade
Parent(s)	Last Name	First Name	Date of Birth / /	Phone Number	
	Last Name	First Name	Date of Birth / /	Phone Number	
Street Address & Apt #			City	Zip	
This living arrangement is: <input type="checkbox"/> Temporary, Duration: _____ <input type="checkbox"/> Permanent					
<p>The address listed above is my only residence. I understand that it is my responsibility to furnish the school with new phone numbers and change of address information within 72 hours of the change and that a school official may visit the above listed address to verify occupancy during the school year. If residency has changed within the district, proof of residence must be resubmitted. If outside the district, appropriate transfer forms will also be required. I understand that an inter-district transfer may not be accepted by the district. I understand that if the information provided is incomplete, inaccurate, or false, my children may be immediately withdrawn from any school in the Hacienda La Puente Unified School District, except my school of residence.</p>					
Parent/Guardian Signature		Date		CA Driver's License/ID Card Number	

To be Completed by Primary Resident/Owner:

Last Name	First Name	Date of Birth / /	Phone Number
I, _____, declare/certify that I am the primary resident/owner at <i>Name of Owner, Lease Holder, Landlord, Qualified Relative, Friend, Neighbor, etc.</i>			
<i>Street</i>		<i>City</i>	<i>Zip Code</i>
and that the above mentioned adult(s) and student(s) reside with me on a full time basis (seven days a week year round). I agree to notify the Hacienda La Puente Unified School District if there is any change in the status of the residency of the persons listed above. I understand that a school official may visit the above listed address to verify occupancy during the school year. I further agree to provide proof of my residency to the Hacienda La Puente Unified School District. I declare under penalty of perjury under the laws of California that the previous information is true and correct.			
Parent/Guardian Signature		Date	
CA Driver's License/ID Card Number			

Office:	Driver's License/ID Copy: <input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Primary Resident/Owner
	Address Verification: Current Utility Bill (not overdue, past due or final bill): <input type="checkbox"/> Gas Bill <input type="checkbox"/> Water Bill <input type="checkbox"/> Electric Bill
	<input type="checkbox"/> Final Escrow Papers <input type="checkbox"/> Mortgage Statement <input type="checkbox"/> Property Tax Bill <input type="checkbox"/> Lease <input type="checkbox"/> Rental Agreement (not receipt)
Date Verified: / /	