



# RESIDENCY VERIFICATION FORM

(For families with multiple students, a copy of this form will be placed in each student's file)

- Homeowner
- Renter
- Other (Specify)

Washington law generally requires schools to be open to the admission of all persons between the ages of 5 and 21 residing in that school district (RCW 28A.225.160). The Issaquah School District is required to take appropriate steps to ensure that students attending our schools satisfy applicable laws. The Residency Verification Form must be completed, signed, and submitted with appropriate documentation demonstrating compliance with Washington's residency laws.

**NOTE:** There is no provision for nonresident families who live in the region to claim residency for their student(s) in the district because they have made arrangements to live with a family member or friend who lives within the district boundaries. There is no provision for resident or nonresident families to maintain a second residence within the district solely for the purpose of enrollment at a specific school.

**The following documents are required for enrollment into the Issaquah School District:**

- Residence Verification-Purchase Papers OR Property Tax Statement OR Full Lease Agreement including signature page on Company Letterhead.
- PSE Bill-This bill must include the parent/guardian's name, the address and no older than 30 days. If you are renting/leasing your residence in which all utilities are included in your rent, you can provide an Affidavit of Residence with a Sponsor/Landlord. Notarization is required.

<u>Student:</u> Last Name	First Name	School	Grade		
<u>Guardian:</u> Last Name	First Name	Primary Phone	Second Phone	Relationship to Student	
<input type="checkbox"/> Please check if Primary Phone is confidential.					
Resident Address	Street	Apt #	City	State	Zip

**Please do not sign this form if any statements above are incorrect.**

"I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I understand that falsification of information to achieve enrollment or assignment may be cause for revocation of the student's enrollment or assignment to a school in the Issaquah Public Schools. I agree to notify the Issaquah School District in writing within five (5) school days following any change of my/ours residency."

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY:** To be signed below by the School Official who verified residency documents checked above.

School Official: \_\_\_\_\_ Date: \_\_\_\_\_