## **Address Verification Statement**

To be completed when you are verifying the residence of a parent/guardian and student(s) for the purpose of enrollment with Laurel Public Schools and the parent/guardian and student(s) reside with you on a full-time basis.

My name is	and I am the homeowner/renter at the
following address:	

The following individuals reside with me, on a full-time basis, at my residence:

## In addition to this form, I will provide/attach ONE of the following:

- □ Copy of a recent utility bill in my name (with service address)
- □ Copy of my lease agreement
- □ Copy of my recent property tax statement
- □ Settlement Statement Page (for new home purchases)

I attest that the individuals listed above are full-time residents at my address. They reside with me, within the Laurel School District boundaries and I am verifying the address of a parent or legal guardian for the purpose of enrollment (or address change) of a student.

Signa	ture*
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Date \_\_\_\_\_

\*Attach a copy of your photo ID **OR** use the notary section below to verify your signature.

	*NOTARY SECTION: REQUIRED IF A COPY OF S	IGNER'S P	PHOTO ID IS <b>NOT</b> ATTACHED)*
State of N	Iontana, County of		_
This record	was signed before me on	by	
	mm/dd/yyyy		Print name of signer Notary Signature
	Affix seal/stamp here.		