



School Year

VERIFICATION OF RESIDENCE

Schools Attending: **Stayton Elem** **Stayton Inter/Middle** **Stayton HS**
 Sublimity **Mari-Linn** **Options Academy**

Student Name: _____ Grade Level: _____

Student Name: _____ Grade Level: _____

Student Name: _____ Grade Level: _____

Student Name: _____ Grade Level: _____

Student Name: _____ Grade Level: _____

Student Name: _____ Grade Level: _____

I, as the parent/legal guardian, declare that my present (and permanent) residential address is:

I agree to provide documentation to validate the above address. I understand that I must notify the school within 24 hours of any change of address and that a school official may visit the address to verify occupancy.

Parent/Legal Guardian Printed Name

Parent/Legal Guardian Signature

Date

Please explain if the above address is not permanent and include what your future address will be and when you expect it to be effective:

For parent/guardian: If submitting online, please scan or take a photo of one of the items below and send to all schools where your students are being enrolled. If you wish to bring the documentation in to the school office, we will be happy to verify it in-person.

For school use only:

Address verified by school employee via: _____ Utility Bill _____ Escrow Paperwork
_____ Rental Agreement _____ Parent/Guardian ID _____ Other: _____