



VIRGINIA BEACH CITY PUBLIC SCHOOLS CHARTING THE COURSE

Shared Housing Form (2026-2027)

THIS DOCUMENT WILL NOT BE ACCEPTED IF NOT COMPLETELY FILLED OUT

If a student/family is found to be in a homeless situation, the McKinney-Vento Homeless Education Act allows enrollment without a permanent address. Not all Shared Housing situations are considered homeless. If you feel your situation would qualify under this provision, please complete the Questionnaire Family/Student Domicile form and submit to the school registrar. Call Project HOPE Virginia Beach at 757-263-2062 for additional information.

This section is to be completed by the Parent(s)/Legal Guardian(s), one (1) form per school:

Student Name(s): _____

School: _____

Name of Parent(s)/Legal Guardian(s): _____

Phone number of Parent(s)/Legal Guardian(s): _____

Previous Address: _____

Reason for Request/Reason Left Previous Residence: _____

Parent/Legal Guardian Car(s) License Plate Number(s): _____

Name of Homeowner/Lease Holder: _____

Phone number of Homeowner/Lease Holder: _____ Date Shared Housing Began: _____

Shared Housing Address: _____, Virginia Beach, VA _____

This permission has to do only with registration for classes. Any student who transfers from one school to another within the city, without a corresponding change of address, will be ineligible to participate in any VHSL activity for a period of one calendar year from the date of enrollment. If your child plans to participate in a Virginia High School League (VHSL) activity, please list the activity: _____ **Please give a copy to the Student Activities Coordinator.**

Required Documents:

Leaseholder/Homeowner:

- Title deed, mortgage booklet or statement -OR-
- Lease agreement/rental contract or current rent receipt
- AND ONE OF THE FOLLOWING-
- Most recent utility bill (gas, electric, water only)
- Deposit receipt for recent utility start-up

Parent/Legal Guardian:

- Driver's license or DMV ID with current address
- AND ONE OF THE FOLLOWING WITH CURRENT ADDRESS-
- Bank statement
- Vehicle registration
- Paycheck stub
- Voter registration card

Note to Parent/Legal Guardian: **The student will be given temporary enrollment at the time of registration. The parent/legal guardian will have 30 days to provide your required documentation.** The Leaseholder/Homeowner's required documentation is required prior to enrollment. **Failure to provide the required documentation will result in the withdrawal of your student(s) from school.**

Office Use Only		Reviewed by Administration	
Accepted by:	Date:	Admin:	Date:

This section is to be completed by the Leaseholder/Homeowner:

I hereby affirm that my primary residence is located at:

_____, Virginia Beach, VA _____

Living with me are the adults and children listed below:

Name(s) of adult(s) residing with me: _____

Name(s) of child(ren) residing with me: _____

Note to Leaseholder/Homeowner:

**By signing below, I affirm that the information above is true, complete, and accurate under penalty of Section 22.1-3.2 of the Code of Virginia. I am aware that any false or fictitious statements or claims may subject me to criminal, civil, or administrative penalties. Failure to be truthful and/or forthcoming regarding your residency and the time of your residency change will initiate the immediate withdrawal of your student(s) from Virginia Beach City Public Schools, in addition to:*

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| <ul style="list-style-type: none"> • I understand that enrollment of the above-named student(s) will be based on my sworn statement that the child(ren) and parent(s) are residents of Virginia Beach, whose primary nighttime residence is at the location listed above. (The parent and child must be residing in your home every night during the school week.) • I understand that a <u>home inspection may be made</u> to verify residency. | <ul style="list-style-type: none"> • I understand that I can be charged with a Class 4 misdemeanor for knowingly making a false statement concerning the residency of a child in a particular school division or school zone. • I understand that I <u>may be liable for payment of tuition</u> for them if this statement is false. I also agree to notify the school principal of any change of residency of the above-named adults or students within three (3) days of such change. |
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Signature of Leaseholder/Homeowner **Date**

Note to Parent/Legal Guardian:

**By signing below, I affirm that the information above is true, complete, and accurate under penalty of Section 22.1-3.2 of the Code of Virginia. I am aware that any false or fictitious statements or claims may subject me to criminal, civil, or administrative penalties. Failure to be truthful and/or forthcoming regarding your residency and the time of your residency change will initiate the immediate withdrawal of your student(s) from Virginia Beach City Public Schools, in addition to:*

- | | |
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| <ul style="list-style-type: none"> • <u>My child and I maintain</u> our nighttime residence every night during the school week at the address listed above not solely for school purposes. • I have <u>no other residence</u> in Virginia Beach or elsewhere. • This is not a subleased property. • I will notify the school principal of any change in residency within three (3) days. • I understand that I cannot leave the child(ren) for any length of time in the care of a non-custodial relative or adult. • I understand if the documentation listed below is not received within 30 days, my child(ren) will be withdrawn. | <ul style="list-style-type: none"> • If any of this information is false, I <u>may be liable for payment of tuition.</u> • I understand that I can be charged with a Class 4 misdemeanor for knowingly making a false statement concerning the residence of a child in a particular school division or school zone. • I understand a home inspection may be made to verify residency. • I understand that if the Shared Housing is an apartment complex, the manager will be contacted for verification. • The documentation presented as proof of residence attests to my permanent move. (The original residence must be abandoned and may not be used by any family member.) |
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Signature of Parent/Legal Guardian/Adult Student **Date**

To be completed by a Public Notary:

State: _____ City: _____ Subscribed and sworn before me on: _____

My commission expires: _____

Notary Public Signature
SEAL