



Folsom Cordova Unified School District

For Office Use Only:

Received: \_\_\_\_\_

School Year: 2025 - 2026

# AFFIDAVIT OF RESIDENCY

As parent and/or legal guardian of \_\_\_\_\_  
*Print Student's Name*

\_\_\_\_\_  
*Student's Date of Birth (DOB) Print School Site and Grade*

Please list any and all dependent children living with you, birth through high school completion, below:

Dependent/s Name	Age/DOB	School/Grade	Dependent/s Name	Age/DOB	School/Grade
1.			4.		
2.			5.		
3.			6.		

I hereby declare under penalty of perjury that my student and I reside with \_\_\_\_\_  
*Print Resident's Name*

at \_\_\_\_\_  
*Print Resident's Address City Resident's Telephone Number*

\_\_\_\_\_  
*Print Parent/Guardian Name Contact Phone Number Cell Phone Number*

\_\_\_\_\_  
*Parent/Guardian Signature Date*

Please provide \_\_\_\_\_, and \_\_\_\_\_  
*Print Alternate Contact Name Phone Number Print Relationship to Student*

I hereby declare under penalty of perjury that the above listed student and parent(s) do reside with me in my home at the above listed residence. This form is to be signed in person at the student's home boundary school office.

\_\_\_\_\_  
*Resident Print Legal Name Relationship to Student Signature Date*

**Note** - Falsifying residency of attendance requirements will result in immediate disenrollment of student. Also note that School Resource Officer and/or a District Administrator may visit the residence to verify student and parent/legal guardian do in fact reside at the above listed residence.

<b>Residence Verification</b>	
Address Verified by _____	For School Year _____
Utility Receipt: <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E <input type="checkbox"/> SBC <input type="checkbox"/> City of Folsom <input type="checkbox"/> City of Rancho	
Rental/Sales Agreement: _____	