

JACKSON COUNTY

School District

Residency Verification

Student Name: _____ DOB: _____ Grade: _____

Parent/Legal Guardian Name: _____

Address: _____ City: _____ Zip: _____

Telephone: _____

(Primary)

(Work/Alternate)

I, the parent/legal guardian, do verify that the proofs of residency submitted to Jackson County School District are a true and accurate representation of my legal residence.

Parent/Guardian Signature

Date

Two Proofs of Residency

Two (2) proofs of residency are required. At least one (1) proof must be from Column A. All proofs must display proper name and address. No documents with a post office box as an address will be accepted. (Per Policy JBC)

Column A

- ☐ Filed Homestead Exemption Application Form
- ☐ Mortgage Statement or property deed; No property tax documents
- ☐ Signed current apartment or home lease (all pages)
- ☐ Current Utility bills; (Per MDE, NO cut-off or disconnect notices); No car/home insurance statements; no cell phone bills; no hunting licenses; Bill must be current, within 30 days of date of registration

Column B

- ☐ Driver's license or Mississippi State-Issued Identification Card; (Must show current address)
- ☐ Automobile registration; (Must be current year's registration, not expired)
- ☐ Voter registration card
- ☐ Government mailing (Federal, state, or county) within the last 30 days
- ☐ Any other document that will objectively and unequivocally establish the Parent or Guardian resides within the school district-must be approved by an administrator.

Parent/Guardian to complete top only

OFFICE USE ONLY:

I, the employee of Jackson County School District, do verify that I have seen and approved this student's residency documents as indicated on this form.

District Employee Signature

Date

Registration Checklist

- _____ Birth Certificate (*Required*)
- _____ Immunization Compliance (Form 121 or 122) (*Required*)
- _____ SUMMER ENROLLMENT: final grades (report card) from previous school
- _____ SCHOOL YEAR ENROLLMENT: withdrawal form from previous school showing past term grades and current grades

Prior School Name

Prior School City, State

- ☐ Yes ☐ No -Legal Paperwork (custody, adoption, name change, guardianship)
- ☐ Yes ☐ No -Any Special Services (special education, Section 504, Gifted)

New Students