School _____ Grade _____ *For office use only:* MSIS ID_____

TUPELO PUBLIC SCHOOL DISTRICT

RESIDENCY REGISTRATION AND DOCUMENTATION CHECKLIST
TO BE COMPLETED BY PARENT, GUARDIAN, OR OTHER ADULT ANNUALLY

Name of Student: _____

(A SEPARATE FORM IS REQUIRED FOR EACH STUDENT)

Name of Parent, Guardian,
or Other Adult: (Circle One) _____

Address of Parent, Guardian, or Other Adult: _____

(A P.O. Box number is not acceptable for an address; if route, give physical location directions on back.)

____ Our night time arrangements have changed and my child may be eligible for homeless services.

I hereby certify that the information given above on this form is a true and correct statement of my legal residence. Should my legal residence change while the above listed student is enrolled in the above cited school district, I will promptly notify the appropriate officials of this school district. Further, I understand that a student is not legally enrolled until this form is completed and signed by the parent, guardian, or other adult with whom the student is living. I understand that a student admitted under false information is not legally enrolled and is subject to penalty.

_____ _____ _____

Signature of Parent, Guardian, or Other Adult | Date | Telephone Number

~TO BE COMPLETED BY THE SCHOOL DISTRICT~

(Office Staff: A minimum of two proofs are required of ALL Students).

Provide one document from each Group (Group 1 & Group 2). If applicable, provide one proof from Group 3.

Group 1	Group 2
___ Mortgage Statement (**dated within the last 45 days**)	Utility Bill **(dated within the last 45 days)**
___ Property Tax Display Form (**dated within the last 45 days**)	___ Electric*
___ Filed Homestead Exemption Application Form*	___ Gas*
___ Filed Property or Warranty Deed*	___ Water*
___ Current Apartment or Home Lease Agreement	___ Cable*
*Dated during 2025-2026	*Use the Billing, Meter Reading, or Statement Date

(Note: A driver's license, automobile registration or voter precinct identification are no longer acceptable proofs.)

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Group 3: If utilities are included in the Apartment or Home Lease/Agreement, please use one of the following documents for the second proof of residency (dated within the last 45 days):

_____ Doctor, dentist or hospital bill (mailed)
_____ Insurance policy (Health)
_____ Salary check stub
_____ Bank statement
_____ Credit card statement
_____ State or federal benefit check
_____ Government mailing (Social Security or Medicaid Determination letter, IRS, etc…)
_____ Other residency documentation approved by TPSD

Group 4: Affidavit, McKinney-Vento, and Foster Care (Best Interest Determination - BID) Enrollment

_____A. Affidavit of Residency Permission to Enroll Packet
_____B. McKinney-Vento Permission to Enroll Packet
_____C. Foster Care Nonresident School of Origin Permission to Enroll Packet (BID Confirmation Attached)

Group 5: Tuition (Nonresident) Student

_____A. Tuition has been approved by TPSD Board. Attachments: Tuition receipt/**Nonemployee** Admission Form (JBCC-E1)
_____B. Tuition has been approved by TPSD Board. Attachment: **Employee** Admission Form (JBCC-E2)

Group 6: Guardianship/Custody

_____A. Student is living with legal guardian and a certified copy of the Court Decree, or petition if pending, was received declaring the district resident to be the legal guardian of the student and further declaring that the guardianship was formed for a purpose other than establishing residency for the school district attendance purposes.
_____B. Student is living with an adult other than parent or legal guardian and the adult has provided a sworn Affidavit stating his/her relationship to the student, and that the student will be living in his/her home full time and fully explaining the reasons (other than school attendance zone or district preference) for this arrangement and the School Board or its designee has made the necessary factual determination under II.1(c) (2) of the State Residency Verification Procedures.
_____C. In case of separated or divorced parents, please provide a copy of the court order establishing custody.
_____D. Foster Care

_____ **Date:** _____

Signature - School Representative