



FABENS INDEPENDENT SCHOOL DISTRICT  
ALTERNATE PROOF OF RESIDENCY

Campus: \_\_\_\_\_

School Year: \_\_\_\_\_

Administrator's Signature: \_\_\_\_\_

Parent/Guardian

I, \_\_\_\_\_ parent/guardian of minor child(ren) \_\_\_\_\_  
\_\_\_\_\_, affirm that we, the parent/guardian and child(ren), reside full-time with  
\_\_\_\_\_ at \_\_\_\_\_  
Name of Owner of Residence Address City/State/Zip  
in the \_\_\_\_\_ attendance area.  
Name of School

I understand that if there is a change in residency, it is my responsibility to notify a campus administrator immediately.

Signature of Parent/Guardian

Date

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Owner of Residence

I, \_\_\_\_\_ resident of \_\_\_\_\_  
Owner of Residence Address City/State/Zip

affirm that the family named above resides with me full-time at my current address. I understand that it is my responsibility to provide  
proof of residence as required by Fabens ISD FD Local Policy.

Signature of Owner Resident

Date

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General Information

We understand that a person commits an offense if he/she makes, presents or uses any record, document or device with knowledge of its  
falsity and with the intent that it be taken as a genuine record. This type offense is a **Class A Misdemeanor** unless the actor's intent is to  
defraud, in which event the offense is a felony of the third degree.

(PENAL CODE, Chapter 37).

In addition to the penalty provided by **Section 37.10 (Penal Code)**, a person who knowingly falsifies records is subject to the greater of:  
Signature of Parent/Guardian

- 1.The maximum tuition the district may charge, or
- 2.The amount the district has budgeted for each student, (Texas Education Code, Section 25.001)

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Notary

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public

In and for El Paso, El Paso County, Texas

My commission expires \_\_\_\_\_.