ROCHESTER COMMUNITY SCHOOLS

PRIDE IN EXCELLENCE

Residency- **Shared**

Household Affidavit

This form is to be used if you are residing with a homeowner, or a resident holding a current lease in this district . ***If the resident is leasing, your name and your child's name must be on the lease agreement.***

Page 1 to be completed by the parent or legal guardian, and signed in the presence of a Notary Public .

I do hereby certify that the information supplied concerning residency is correct. I understand that if I change addresses within the district, or move out of the district, I must immediately notify the Office of Student Enrollment.

I am aware that if I have enrolled my child/children based on false or inaccurate residency information, I will be held liable for all tuition costs incurred by the district, and my child/children will be dropped from Rochester Community Schools Attendance.

Initial you have read the above _____

_____ _____

Signature of Parent/Legal Guardian Date

_____

Parent/Legal Guardian's Driver's License Number

.....

State of Michigan}

County of _____}

Subscribed and sworn to before me, this _____day of _____, Year_____.

Notary Public, _____

_____ County, Michigan

My Commission Expires: _____

Residency-Shared Household Affidavit

Page 2 to be completed by the resident/property owner in the presence of a Notary Public .

I, (homeowner-print)_____, (homeowner-signature) _____declare that I live within the Rochester Community Schools District boundaries at, (print below)

_____

Street Address, City, Zip Code, Phone Number

And further declare that the _____ family resides in my household. **I confirm that the family sleeps, eats, and attends to their other household related needs at this address**. The parent(s) or legal guardian(s) and their school age children's names residing at my home are listed below:

_____

Name of Parent(s) or Legal Guardian(s)

_____

Name of Student	Grade	Date of Birth
Name of Student	Grade	Date of Birth
Name of Student	Grade	Date of Birth
Name of Student	Grade	Date of Birth

State of Michigan}

County of _____}

Subscribed and sworn to before me, this _____ day of _____,

Year _____.

Notary Public, _____

_____County, Michigan

My Commission Expires: _____