HEMPSTEAD PUBLIC SCHOOLS
Central Registration
15 E. Marshall St, Hempstead, NY 11550
516.434.4160

Residency Affidavit

(Please fill out this form in its entirety and it must be notarized.)

This document will certify that I_____,parent or guardian of,
(Print First and Last Name)

Name of Child	DOB	Male or Female
Name of Child	DOB	Male or Female
Name of Child	DOB	Male or Female

Currently reside at:

_____
Address and Telephone Number

(Check one) with: Family _____ Friend _____ Other(Please Specify) _____

*I cannot provide a lease, mortgage, deed, or other documents of permanent or legal residency (see list of documents) but live fully and completely at the above provided address. I will notify the school district of any change of address occurring while my children are enrolled in Hempstead Public School. *

_____
Relative/Friend's Name, Address and Telephone Number

Signature:_____

Sworn to mc before this._____
day of_____ 20_____

Warning: This district will take legal action to collect tuition charges which may exceed $11,500 per year if a student is illegally registered. Any person or persons, in addition to the parents or guardians, who provide false evidence or residence, will also be prosecuted. The district will investigate students' residence by home visits and other means.

Revised 25/26