



WOODBRIDGE SCHOOL DISTRICT

Woodbridge, Connecticut

New Enrollee Verification of Residence

Please Print: I, _____, the parent or legal guardian of (student name(s)) _____

(address) _____ (telephone number) _____

Certify that the above named student(s) meets the Woodbridge Board of Education residency requirements (Policy #5111), which require the student(s) be a permanent resident of Woodbridge, Connecticut.

Residency in Woodbridge is defined as: permanent full-time occupancy of a Woodbridge residence, by at least one parent and the student; provided without pay; and not for the sole purpose of obtaining school accommodations. When a student lives apart from his/her parents or legal guardian, the parent/legal guardian must prove that such residency is permanent (full time), provided without pay and not for the sole purpose of obtaining school accommodations. The burden of proof in determining student residency shall be on the party claiming residency. School staff cannot accept any substitutions on the list of acceptable proofs and students will NOT be enrolled until documents of residence have been verified.

This information and the documents provided are accurate. I authorize representatives of the Woodbridge School District to verify this information and attest to the accuracy of the information contained in this form. I understand falsification of any information or documents required for this verification will result in revocation of registration of the student(s).

I understand that should the student(s) be found to be attending the Woodbridge School District illegally, the Woodbridge School District may pursue legal remedies against the parent/guardian and/or the resident with whom the child resides, including but not limited to collecting tuition (plus any additional costs that may apply for Special Education) for the period of unauthorized attendance from the parent/guardian as provided in Connecticut General Statutes, Section 10-186(b)(4). The tuition charge(s) may be imposed for the current school year or for any past year in which the child was enrolled in Woodbridge School District.

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut and that this document may be used in a court of law as evidence against me.

Parent/Guardian Signature _____ Date _____

FOR OFFICE USE ONLY

In order to verify district residence, the child over 18, parent(s) or guardian(s), or emancipated minor must sign above AND provide:

One Document showing proof of home ownership or rental:

_____ Copy of one of the following at address within district in parent's name:

- a. Deed to home
- b. Contract of Purchase with Closing date
- c. Mortgage Statement
- d. Property Tax Bill
- e. Construction Contract with Anticipated Move-in Date *(Notarized signed by Closing Attorney)*
- f. Signed & Dated Rental Agreement and Rent Receipt *(Notarized, Renter AND Landlord)*
- g. Landlord & Parent Affidavit *(Notarized)*

Three Supporting Documents:

_____ Two current utility bills (land-line telephone, water, electric, gas, oil – NOT cellphone).

_____ Photo ID (CT driver's license or State ID card) showing current Woodbridge address

(New residents must provide all acceptable proof documents within one week of signing this document)

If Necessary:

_____ Verification visit by Woodbridge Police Department staff on (date) _____

Documents verified by School Official (print name) _____ Date: _____



WOODBRIDGE SCHOOL DISTRICT AFFIDAVIT OF PARENT / LEGAL GUARDIAN

I hereby certify that _____ is my _____
(Student's Name) (Relationship)

moreover, that h/she resides with _____ who is _____
(Name of person) (Relationship/s)

at _____ / _____
(Street Address) (Telephone #)

I further certify that this is intended to be a bona fide permanent address at which my child will be living for _____ days and _____ nights per week and that I am not providing payment for having my child to reside with anyone.

As a parent/guardian of the student named on this form, and as a resident of the Town of Woodbridge, I authorize representatives of the Woodbridge School District to verify this information and I attest to the accuracy of the information contained in this form. I understand falsification of any information or documents required for this verification will result in revocation of registration of the student(s) and that the Woodbridge Board of Education may, in its sole discretion, exclude the child from the Woodbridge School District for the balance of the school year.

I understand that the Woodbridge School District may pursue legal remedies against the parent/ with whom the child resides, including but not limited to collecting tuition (plus any additional costs that may apply for Special Education) for the period of unauthorized attendance from the parent/guardian as provided in Connecticut General Statutes, Section 10-186(b)(4). The tuition charge(s) may be imposed for the current school year or for any past year in which the child was enrolled in Woodbridge School District.

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut. I also understand that this document may be used in a court of law as evidence against me.

Date: _____

Signature: _____

Print Name: _____



WOODBIDGE SCHOOL DISTRICT AFFIDAVIT OF LEGAL RESIDENT / GUARDIAN

I hereby certify that _____ is my _____
(Student's Name) (Relationship)

moreover, that they legally reside with me at

(Street Address) / _____
(Telephone #)

I further certify that this is intended as a bona fide permanent address and that this student will be living with me _____ days and _____ nights per week, and that I am not receiving payment for having this student reside with me, and that the above named child is not residing with me for the sole purpose of obtaining school accommodations. I certify that this student is residing with me because _____

As a guardian and/or the resident with whom the the student named on this form resides, and as a resident of the Town of Woodbridge, I authorize representatives of the Woodbridge School District to verify this information and I attest to the accuracy of the information contained in this form. I understand falsification of any information or documents required for this verification will result in revocation of registration of the student(s) and that the Woodbridge Board of Education may, in its sole discretion, exclude the child from the Woodbridge School District for the balance of the school year.

I understand that the Woodbridge School District may pursue legal remedies against the guardian and/or the resident with whom the child resides, including but not limited to collecting tuition (plus any additional costs that may apply for Special Education) for the period of unauthorized attendance from the guardian and/or the resident with whom the the student named on this form resides as provided in Connecticut General Statutes, Section 10-186(b)(4). The tuition charge(s) may be imposed for the current school year or for any past year in which the child was enrolled in Woodbridge School District.

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut. I also understand that this document may be used in a court of law as evidence against me.

If you are the legal guardian of the student, please provide the document and indicate the date and source of your authority below:

Date _____ Authority _____

Signature of Resident/Guardian _____

Print Name: _____



WOODBIDGE SCHOOL DISTRICT AFFIDAVIT OF PROPERTY OWNER / LANDLORD

I, _____
(Name of Property Owner/Landlord)

am the property owner of the dwelling located at

(Street Address, City, State)

Property Owner / Telephone _____ hereby certify that I am renting this dwelling from
_____ to _____
(Month/Day/Year) (Month/Day/Year)

to the following persons identified as tenants having the right to be occupants in the dwelling:

Parent/Guardian: _____ Parent/Guardian: _____

Name of Child: _____
Last First MI

Name of Child: _____
Last First MI

List all other persons residing in the dwelling:

Last Name

First Name

Relationship

Last Name	First Name	Relationship

Is Utility Bill included in rent: Yes _____ No _____ Utility _____
If Yes, a copy of the most recent Utility Bill for the dwelling indicating Property Owner/Landlord's name must be submitted.

As the Property Owner/Landlord, I certify that I will notify the Woodbridge School District, in writing at 40 Beecher Road, Woodbridge, CT 06525, within 10 days of termination of this tenancy relationship.

I understand that a perjured or fraudulent statement may lead to my prosecution under the criminal statutes of the State of Connecticut. I also understand that this document may be used in a court of law as evidence against me.

(Signature of Property Owner/Landlord)

(Print Name)