



SCHOOL AFFIDAVIT OF RESIDENCE

Name _____

Street Address _____

City, State _____

Zip _____

Date _____

To Whom This May Concern,

I, _____, hereby attest and claim the individual known as _____ (**child or children**) resides at the street address of _____, City of _____, State of _____ and has since _____, 20____ temporarily with a (**Name of family member, friend of family, shelter or hotel**)_____. I understand that once I have obtained a permanent residence I will notify the Health Sciences Charter School within 10 calendar days of my move. Additionally, I understand that a notarized letter stating my current situation along with documentation of economic hardship (**eviction, health and safety notice, doubled up due to loss of income—letter from previous employer, etc.**) will accompany this affidavit at the beginning of each school year.

Furthermore, I swear and affirm under penalty of perjury that the facts set forth in this statement are true and accurate.

Sincerely,



Witness Acknowledgment

I/We, as witness(es) to the aforementioned claims made by _____ and acknowledge their residency status.

Witness Signature _____ Date _____

Print Name _____

Witness Signature _____ Date _____

Print Name _____

Notary Acknowledgment

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of _____

County of _____

On _____, before me, _____, Notary Public, personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of in the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

Print Name _____

Place Notary Seal Above

