MERIDEN PUBLIC SCHOOLS MERIDEN, CONNECTICUT

RESIDENCY AFFIDAVIT

The Meriden Board of Education, in compliance with Section 10-253(d) of the State of Connecticut, requires this form to be completed for any student who claims residence in Meriden but is not residing with his or her parents and whose parents are either residing or not residing in Meriden. This form is required when there is a question about the child's actual residence. The student, parent, and person with whom the student is living must fill out this form together.

Date _						
1.	Student's Name				DOB:	
		(last)	(first)	(middle)		
2.	Name of Studer	it's Parent/Guard	lian			
	Relationship: _	Mother	Father	Guardian	(Telephone #)	
	Parent/Guardian Address					
		(No. a	nd Street)		(City)	(State)
3.	Name of Studer	it's Parent/Guard	lian			· · · · · · · · · · · · · · · · · · ·
	Relationship: _	Mother	Father	Guardian	(Telephone #)
	Parent/Guardiar	n Address				
		(No. ar	nd Street)		(City)	(State)
4.	Name of Persor	with whom the s	student currently I	ives		
	Name of Person with whom the student currently lives					
	Relationship					
	Address	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
	(No. and Street)				(Telephone	e #)
5.	Student's forme	r address				
		(No. a	and Street)	(City)) (Zip	o)
6.	**Date Student	Moved				
7.	Is the student of	currently enrolle	ed in a Meriden P	Public School? Yes _	No	
		•		_		
8.	If yes, which so	chool:		Grad	e	
	• .					
9.	Former School	if not a Meriden	Public School)			
	. 557 5611001 (
	(Name)			(City)		(State)
	(INGILIE)			(City)		(State)

PARENT/GUARDIAN STATEMENT

Ι,	, hereby certif	fy that	is my
	(parent/guardian name)	(student name)	(relationship)
and	d he/she resides with(Name of Host)	who is his/he	r(relationship)
at _	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(address)		(Telephone #)
 chil	rther certify that this is intended to be a bond nights per week (NOT for the sole put defended with the above-named person. son/daughter is not living with me becaute My work schedule (please explain)	urpose of education) and that I an	n not providing payment for having my
	Family conflict (please explain)		
	I have moved out of my son/daughter's c Other (please explain)	current school district and he/she wis	hes to remain in their current school
Wh	ere does your child spend substantial time v	when school is not in session?	
Wh	ere would your child go if he or she left or w	ras not permitted to attend school? _	

As a parent of the student named on this form, I attest to the accuracy of the information contained in this form. Further, I certify that, as a permanent resident of the City of Meriden, the student is eligible for free school privileges. I agree to notify school officials immediately regarding the termination of the student's permanent residency in the City of Meriden, in which even the student will no longer be eligible for free school privileges. Finally, I understand that should the student be found to be attending Meriden Public Schools illegally, the City of Meriden reserves the right to recover the costs for such education from me, the undersigned.

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 a	as evidence against me.							
**OPTIONAL: I hereby certify that(Name of person)	has the full right to act in my							
child's behalf concerning any and all school disciplinary, administrative, and medical matters.								
DO NOT SIGN UNTIL YOU ARE IN THE PRESENCE OF A NOTAR	RY							
Parent/Guardian Printed Name	Date							
Parent/Guardian Signature	Date							
Witness (Notary Public or Officer of the Court)	 Date							

HOST'S STATEMENT

I	, hereby certify that	at	is my			
(Host's name)			(Student's name)			
	and that he/she l	egally resides with me at my	y residence which is			
(relationship)						
	. I furthe	er certify that this is intended	as a bona fide permanent			
(Address)		•	·			
address and this child will education), and I am not rec			er week (NOT for the sole purpose of			
I certify that this child is resid	ling with me because					
information contained in this eligible for free school privile permanent residency in the	s form. Further, I certify the eges. I agree to notify sch City of Meriden in which e buld the student be found to	nat, as a permanent resident nool officials immediately requested the student will no long to be attending a Meriden Pu	Meriden, I attest to the accuracy of the at of the City of Meriden, the student is garding the termination of the student's ger be eligible for free school privileges. blic School illegally, the City of Meriden			
I understand that a perjur the State of Connecticut.	ed or fraudulent stateme	nt may lead to my prosec	cution under the criminal statutes of			
I also understand that this do	ocument may be used in a	court of law as a service aga	ainst me.			
OPTIONAL: I,(Printed Nar student concerning any and	ne of Host)	, understand that I have inistrative, and medical matt	, ,			
DO NOT SIGN UNTIL YOU (Host's signature)	ARE IN THE PRESENCE (OF A NOTARY (Date)				
Witness (Notary Public or 0	 Officer of the Court)	(Date)				