#### RESIDENCY AFFIDAVIT

#### **Residency Affidavit Procedures**

- 1. Take the completed and notarized Residency affidavit form to the boundary school. The school district staff member will examine the affidavit for authenticity.
- 2. For accountability reasons, the following supporting documentation will required by both the parent(s)/legal guardian(s) with your residency affidavit application:
  - a. A current driver's license/state ID
  - b. and/or a current passport
- 3. The homeowner/Tenant must provide two (2) proofs of residency documents showing his/her name and address. Acceptable documentation includes:
  - a. Deed
  - b. Mortgage Statement
  - c. Current Property Tax Bill
  - d. Current Utility Bill
  - e. Original Lease
  - f. Current employer pay stub



# RESIDENCY AFFIDAVIT

SY			
Must	be	completed	annually

	Name of Parent (s)/Guardian				
Name of Paren	t (s)/Guardian				
e at					
Address		Zip Code	Telephone N	Telephone Number	
	in the Kenosha Unified School District since				
Resident's/Homeowner's Name				Date	
TION 2 - CHILDREN'S INFORMATION	J				
attest that the children listed below live		provided a	bove, and that I/we have	e no other residenc	
Name of School Aged Children (Last, First)	Date of Birth	Current Grade Level	Boundary School	Current School	
	+				
TION 3 - HOMEOWNER OR TENANT V	VEDIEICATIO	a No.			
HON 3 - HOWEOWNER OR LENANT	VERIFICATIO	/IN			
-					
Homeowner or Tenant of Residence	hereby attes	st that I <b>am t</b> h	e legal owner or lessee of	the property located	
	. I further	attest that	Name of Parent(s)/Guardian		
Address			Name of Parent(s)/Guardian	1(s)	
he above mentioned child(ren) is/are residing	. 1 . 0				

# RESIDENCY AFFIDAVIT

### SECTION 4 - SIGNATURE AND NOTARY ACKNOWLEDGEMENT CERTIFICATE

This affidavit is made and executed for the purpose of accept the above child(ren) in the district free of tuition		na Unified School District to					
I understand that the information given in this affidav parent/guardian(s) and or child(ren) living with		District to determine whether the s of Kenosha Unified School					
I further understand that only children who are resided schools free of tuition. I also understand that tuition if open enrollment transfer amount set annually by the V school year is \$6,639 and I will be responsible for the	for a child attending Kenosha Unified Scho Wisconsin Department of Public Instruction	ool District will be equal to the n. The amount for the 2016-2017					
I certify, under penalty of perjury, that the information and the District will rely on this information to determ	-	• • • •					
Name of Homeowner or Tenant	ho are residents of Kenosha Unified School	l District.					
I declare under penalty of perjury that the aforementioned information is true and correct.							
Executed on this day of	, 20						
Printed Name of Notary	Signature o	of Notary					
Notary Stamp Here	My Commission Expires on	Date					
	OFFICIAL USE ONLY						
REVIEWED BY KUSD STAFF (name)	KUSD TITLE	DATE					