



AFFIDAVIT OF RESIDENCY

PART I – To be completed by the Parent / Legal Guardian of the student requesting residency in Fitzgerald Public Schools

1. Name of Parent / Legal Guardian: _____

2. Current Address: _____
(STREET ADDRESS) (CITY / STATE / ZIP)

3. Name(s) of child(ren) you are looking to enroll:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

4. Reason(s) for living with a Fitzgerald Public School District resident: _____

5. Please indicate how long you will be living with the district resident: _____

Parent / Legal Guardian further states that they have come to live in the Fitzgerald Public School District, in good faith, for the purpose of acquiring a suitable home and not for the purpose of obtaining school privileges. The undersigned will notify Fitzgerald Public Schools immediately of any change in said residency.

The Parent / Legal Guardian will provide proof of residency, including, but not limited to:

- Two Recent Bills / Business Mail with CURRENT Address (examples include utility bills, bank statement, insurance, official government mail, cell phone bill, etc.)
- Photo ID with CURRENT Address (Driver's License or State ID)

WARNING

Falsification of information contained in this application will immediately void such agreement and result in said students identified above being immediately dropped from enrollment. Falsification of information will also subject the undersigned to **TUITION CHARGES**, at established school district rates, for the period of time that the students were enrolled in Fitzgerald Public Schools while not a resident.

Signature of Parent / Legal Guardian: _____

Subscribed and sworn to before me on this _____ day of _____, A.D., 20_____.

Signature: _____

Printed Name: _____

Notary Public, State of Michigan, County of _____ Acting in the County of _____

My Commission Expires: _____

NOTICE OF DISCRIMINATION

Fitzgerald Public School District does not discriminate on the basis of gender, race, color, national origin or ancestry, creed, political affiliation or beliefs, religion, age, height, weight, marital status, disability, or any other condition covered by law with respect to the district educational programs, services, activities, and employment.

