

Ashtabula Area City Schools

BOARD OFFICES, 6610 Sanborn Road, Ashtabula, Ohio, 44004 • Phone (440) 992-1200

STATEMENT OF RESIDENCY – PART 1

I, _____ the legal parent/guardian of

(child's name) _____ ,

OWN a home **RENT** Apt. or Home **LEASE** a home within the AACCS District.

I do not own, rent or lease a home but **I LIVE WITH** a relative or friend within the AACCS district. (If you 'live with' a friend or relative, you must also complete the reverse side of this form.)

Resident Address _____

City, State, Zip _____

Main Phone # _____ Other phone # _____

- I attest to the fact that the address above is the residence that this student and I (custodial parent/guardian) live in the majority of the time, including meals and sleeping.
- I understand that if this proves to be untrue, my child will cease to be permitted to attend the Ashtabula Area City Schools.
- I also understand that I will be expected to pay tuition at the current rate, for every month my child attended AACCS but we did not reside in the AACCS District.

The school district, according to AACCS Board of Education policy, has the right to independently verify the above information.

Custodial Parent/Guardian Signature _____
Date

I have provided *Proof of Residency*

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STATEMENT OF RESIDENCY – PART 2

If you and your family are **'living with'** a friend/relative/other within the AACS District, you must have the person you are living with fill in this side of the form prior to student enrollment:

PROOF OF RESIDENCY AFFIDAVIT:

I, _____,
(PRINT) Property Owner Name

of, _____,
(PRINT) Property Owner Address

state that, _____
(PRINT) Names of all people living in your residence

reside(s) with me at the address above. I attest to the fact that this residence is not within the ***Ashtabula Metropolitan Housing Authority (AMHA)*** or ***Harbor Ridge property*** unless I have written permission from management.

I have provided ***Proof of Residency*** (current utility bill or mortgage statement)

NOTARIZED STATEMENT

On this the _____ day of _____, _____, before me, _____,
Month Year Notary Public

the undersigned Notary Public, personally appeared _____,
Homeowner

_____, and proved to me on the basis of satisfactory evidence to be
Parent/Guardian of Child

the person whose name is subscribed to within instrument and acknowledged to me that he/she executed the same for the purposed therein stated.

Homeowner's Signature

Date

Parent/Guardian's Signature

Date

Notary Public Signature

Date

My Commission expires: _____

*Place Notary Seal Above