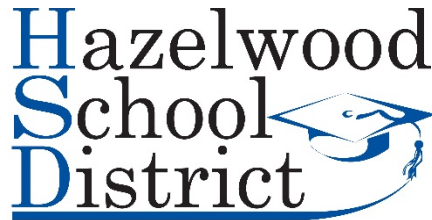


NEW RENEWAL REQUIREMENTS

Return by June 26th with copies of one piece of enrolling parent's credit mail, dated within thirty days, current lease and one intact unpaid utility bill, dated within thirty days, in leaseholder's name



"A Culture of High Expectations and Excellence!"

RESIDENCY AFFIDAVIT RENEWAL FORM 2020-2021

PARENT/GUARDIAN NAME:

ADDRESS:

ZIP:

NEW ADDRESS: Y/N

HOME PHONE:

ALTERNATE NUMBER:

YOU LIVE WITH (Who is the Homeowner/Leaseholder?):

RELATIONSHIP TO YOU:

NUMBER OF CONSECUTIVE YEARS YOU HAVE LIVED AT YOUR PRESENT ADDRESS: (circle one)

0-1 year

1-2 years

2-3 years

3 years or more

LIST ALL OF **YOUR CHILDREN** WHO ARE CURRENTLY ENROLLED IN HAZELWOOD SCHOOL DISTRICT:

NOTE: If you are enrolling any children who did not attend Hazelwood School District last school year, please call the New Student Information Line (314) 953-5141, for further details.

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

Name: _____ DOB: _____ SCHOOL (20-21): _____ Gr. _____

This form shall serve as my declaration that my student(s) and I currently reside at the address stated above. I understand that this address must be within the Hazelwood School District. I understand that the Hazelwood School District may make an inquiry with any appropriate agencies deemed necessary to verify my residency. I understand that any information I give to satisfy my residency status in the Hazelwood School District must be true and correct. I understand that if an investigation determines that my student(s) and I do not live within the District my student(s) will be withdrawn from enrollment and the District may file a civil suit to recover any loss of tuition. I understand that giving false information to satisfy residency or any other part of the enrollment process is a violation of the Missouri Safe Schools Act.

Parent Signature

Date