CIRCLEVILLE CITY SCHOOLS Residence Verification Form/Change of Address Affidavit I

| I certify that I am a resident of the at the following address: | | School District |
|--|---|---|
| Address: | | |
| City/Zip Code: | | |
| Date of Occupancy: | | |
| | e must be provided to school official n. Examples of acceptable forms of following: | _ |
| □ Ohio Driver's License or St□ Special Circumstances (Students) | ırchase e utility bill will be accepted for d | an one family member in |
| person with whom you are living w VERIFICATION AFFIDAVIT II FO PROVIDE PROOF OF RESIDENG | cuments are attainable or are in you vith MUST COMPLETE THE RESID RM and HAVE IT NOTARIZED. The CY to school officials through two ac of documentation include but are no | DENCE ey MUST ALSO cceptable forms of |
| Please list other children enrolled | with Circleville City Schools: | |
| Student(s) Date | te of Birth | Grade |
| | | |
| - | rmation is true and accurate. I unde be false that immediate withdrawal | |
| Parent/Guardian Signature | Relationship to Child | Date |

CIRCLEVILLE CITY SCHOOLS

Special Circumstances Address Verification Form Affidavit II To be completed by the person(s) with which you claim to reside

| To be completed by the person(s) with which you claim to reside | |
|--|----------------|
| I,, being duly cautioned, do solem swear or affirm the following: | nly |
| 1. I am the owner or renter of the residence at | |
| in, Ohio located in the | |
| School District. | |
| 2. The following individual(s) is/are living at my above stated residence and have s since theday of, 20 | 0 |
| | |
| | |
| 3. I acknowledge and understand that if the above information is not true and corrected that knowingly swearing of affirming the truth thereof constitutes criminal falsification violation of Ohio Revised Code Section 2921.13, a first degree misdemeanor, punishable by a maximum fine of \$1,000.00 and/or a maximum term of imprisonments in the second six months. Inaccurate and/or falsified information will result in immediate withdraw stated student(s) from Circleville City Schools. | on, a ent o |
| 4. Owner/renter of the above residence must provide two forms of proof of residen See Affidavit I Special Circumstances. | су. |
| I agree that Circleville City Schools, if they deem necessary, has the right to invest my residency. I agree to allow the release of ownership, rental, and utility informati a representative of Circleville City Schools. | |
| Signature: | |
| (Property owner/Lessee) | |
| Sworn to and ascribed in my presence thisday of, 20 | |
| | |
| Notary Public Signature | |

Stamp or Seal