

Ida Public Schools
3145 Prairie St.
Ida, MI 48140

AFFIDAVIT OF RESIDENCY

(Must be completed by all Ida Residents)

Please Read Carefully:

By signing this affidavit, you are affirming that the address given on all forms is the current legal residence of the parent/legal guardian enrolling the student.

I certify that I, parent and/or legal guardian of _____, and the above named student(s), are residents of the Ida Public School District. (Residence is defined as the location at which you and your child sleep.)

Our address is _____,

Signed _____
Parent/Legal Guardian

Date _____

The following original documents must be submitted, along with this Affidavit of Residency as proof of residency. **You will need to submit the required documents (as listed below) for proof of residency.**

One of the following:

- | | |
|--|---|
| <input type="checkbox"/> Purchase Agreement | <input type="checkbox"/> Rental Agreement |
| <input type="checkbox"/> Tax Receipts or Statement | |

OR

Two of the following:

- | | |
|---|---|
| <input type="checkbox"/> Utility Bill (Within the last 30 days) | <input type="checkbox"/> Driver's License |
| <input type="checkbox"/> Bank Statement (Within the last 30 days) | <input type="checkbox"/> Voter Registration Card with Current Address |

To Be Completed by Notary

Please Note: Should the school district learn that the address listed above is not the residence and/or the parent/guardian lives outside school district boundaries and the student is not an authorized non-resident student, he/she will be excluded from the school district immediately.

STATE OF MICHIGAN
COUNTY OF MONROE, ss.

On this _____ day of _____ 20____. Personally appeared the above named _____, known to me or satisfactorily proven to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed the same for the purposes therein contained.

Before me,

_____, Notary Public

(Printed Name)

My Commission Expires on _____

