Merced Union High School District

Affidavit of Residence with Address

The minor named below lives in my home:

Name of Minor		DOB		Grad Yr	
Current School					

Parent and/or Lawfully Authorized Guardian Information:

Name					
Address		City		Zip	
Home Phone		Work/Cell Phone			
Drivers License or Identification Card Number				DOB	
We have resided at this location for:		# Days	#Weeks	#Months	#Years

As I do not own, nor am I purchasing a residence, and because I rent, lease or share expenses at the above address, I state that I pay rent or share expenses with the individual identified below:

☐ Owner	☐ Manager	☐ Relative	☐ Friend

Name					
Address		City		Zip	
Home Phone		Work/Cell Phone			
Drivers License or Identification Card Number				DOB	

I, the person identified above, declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and I would so testify under oath, if called to do so.

Date _____ Location _____ Signature _____

<u>Warning</u>: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable by a fine, imprisonment, or both. This school district investigates all residing statements (Penal Code 118, 126, 127)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and I would so testify under oath, if called to do so. By signing this form we acknowledge that we have read and understand the conditions above. I also understand that school attendance personnel may visit this address and my neighbors to confirm my residency.

Parent /Guardian _____ Date _____

New residence resulting in change of boundary will need the following:

☐ Continuing Education Permit (if requesting to stay @ current school)

Office Use:

Last/Current School _____ New School (based on boundary) _____ Date _____

Home Visit Verification by _____ Date _____

☐ **Approved** ☐ **Denied** CWAS Administrator _____ Date _____