

**Christie Finley
Superintendent**



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Shared Residence Affidavit Packet Guidelines

- The Shared Residence Affidavit must be notarized.
- Do not sign the form until told to do so by the notary.
- Schedule and complete a home visit by a HCS employee to confirm your address and validate your enrollment status.
- All required supporting documents must be submitted along with the notarized affidavit.
- The Shared Residence Affidavit is good only for the current school year.

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Shared Residence Affidavit Checklist

- _____ Notarized Shared Residence Affidavit
- _____ Student Residency Statement
- _____ Custodial Guardian's Driver's License
- _____ Homeowner's Lease Agreement/Mortgage Statement/Deed or Property Tax Statement
- _____ Homeowner's Utility or Cable bill in the Homeowner's name.
- _____ Current Official Document in the Custodial Guardian's name.
 - _____ SSN/SNAP/TANF
 - _____ Car Insurance
 - _____ Bank Statement
 - _____ Pay Stub
 - _____ Other official document: _____
- _____ Home Visit Completed (Date scheduled: _____)

Student Residency Statement

Date: _____

Student Name: _____ Date of Birth: _____ Grade: _____

Please list additional school-aged children currently living with you.

Name: _____ Date of Birth: _____ School: _____

Name: _____ Date of Birth: _____ School: _____

Name: _____ Date of Birth: _____ School: _____

Current Address: _____

Previous Address: _____

Previous School Attended: _____

Do any of these situations apply:

1. Temporarily staying with others due to loss of previous housing, economic hardship, or similar reason. (A full explanation of the situation is required to determine the appropriate enrollment steps to take.)

2. Eviction from previous housing

Date of eviction: _____

Address of eviction: _____



Shared Residence Affidavit

NOTE: In accordance with HCS Board Policy, this affidavit must be completed if residency requirements cannot be provided due to the fact that the student and his/her parent(s) or legal guardian(s) are sharing a residence with another person seven days per week, year round. This affidavit must be completed annually with notarized signatures.

The Superintendent of Huntsville City Schools or his/her designee may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the student has been enrolled in Huntsville City Schools. The audit may also include a personal visit by a school district social worker or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the Superintendent discovers fraud or misrepresentation, the student shall be withdrawn from school.

Student Information

Student Name: _____

Gender: Male Female DOB: ___ / ___ / ___ Grade: _____

Student Name: _____

Gender: Male Female DOB: ___ / ___ / ___ Grade: _____

Student Name: _____

Gender: Male Female DOB: ___ / ___ / ___ Grade: _____

Student Name: _____

Gender: Male Female DOB: ___ / ___ / ___ Grade: _____

Parent/Legal Guardian Information

Parent/Legal Guardian Name: _____

Parent/Legal Guardian Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

This living arrangement is (select one): Permanent Temporary If temporary, expected duration: _____

I affirm that the address listed above is my only residence. If there is any change to the status of my residence, I agree to notify Huntsville City Schools within seven (7) days. I additionally affirm that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of parent/legal guardian

Date

Digital signatures not accepted for this form. Please print, sign in the presence of notary and submit to the school with the appropriate supporting documentation.



Shared Residence Affidavit

Homeowner Information

I, _____ declare/certify that I am the primary resident/owner at
Full Name of Homeowner, Lease Holder, Qualified Relative, Friend, etc.

Street City State Zip

and the above-mentioned adult(s) and student(s) reside with me on a full-time basis (seven days per week, year round).

I agree to provide proof of my residence to Huntsville City Schools (refer to SS-P6-R1 HCS Enrollment Reference Guide). If there is any change in the status of residence for the above-mentioned adult(s) and student(s), I further agree to notify Huntsville City Schools within seven (7) days. I affirm that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of primary resident/owner Date

Digital signatures not accepted for this form. Please print, sign in the presence of notary and submit to the school with the appropriate supporting documentation.

Sworn to and subscribed before me this _____ day of _____, 20_____.

Seal and signature of Notary Public -Digital signatures not accepted for this form.

My commission expires: _____