

## FAMILY RESOURCE CENTER REGISTRATION DEPARTMENT

45 FOUNTAIN STREET, HAVERHILL MA 01830 EMAIL: REGISTRATION@HAVERHILL-PS.ORG TEL: 978-420-1951 / FAX: 978-469-8730

## **CERTIFICATION OF ADDRESS**

In order to be certain of the correct names and addresses of students and parents or guardians, it is necessary for each person with legal custody of a student attending Haverhill Public Schools to certify names and addresses. This information will be used to assure that only Haverhill residents are attending Haverhill Public Schools.

Please complete the following statement and bring it along with proof of residency to the school. If you reside in a rental property, the landlord's signature *must* be notarized on the certification of address form. Acceptable forms for proof of residency are a copy of your purchase and sales agreement, most current Haverhill real estate tax bill, or a rental agreement signed by the homeowner/landlord. In addition to providing one of these forms, a current, unpaid utility bill (gas, electric, landline phone, etc.), must also be given as proof of residency.

Please be advised that according to Massachusetts General Laws Chapter 76, Section 5, the Haverhill Public Schools is not required to enroll a student who does not actually reside in the City of Haverhill. Any person who violates or assists in the violation of this provision may be required to make full restitution to the Haverhill Public Schools for the cost of tuition.

1. NAME OF STUDENT(S):				
2. Address where student lives:				
(WHERE STUDENT SLEEPS THE MAJORITY OF NIGHTS, EATS MO			керт)	
3. NAME OF PERSON WITH LEGAL CUSTODY:				
PRINT NAME S	IGNATURE ** SIGNED UNDER PENALTIES OF PERJURY**			
4. Address of where legal guardian lives:				
5. Notarized Signature and phone number of building manage	ment or landlord of	property where studen	t lives:	
		Phone #		
Building Mgt/Landlord Signature ** Signed Under Penalties of	f Perjury**	111011011		
Signatu	re Witness			
Commonwealth of Massachusetts County	On this	day of	, 20,	
before me, the undersigned notary public, personally appeare	d			
(or and		), to me known (or proven		
	) to be the person(s) whose name is			
signed on this, the preceding, or attached document in my pre	esence.			
CEAL	NOTABY BUBLIC			
SEAL  Lunderstand it is my obligation to inform the school administra	NOTARY PUBLIC	uchild attends should a	ny of the above	

information change. I understand that Haverhill Public Schools has a restricted residency policy, and if the above stated

residence should come under question, the policy requires that additional proof be supplied.