



School Year:
2020-2021

ANNUAL Residency Verification Affidavit

The San Dieguito Union High School District will ONLY enroll students whose parent/guardian resides within the District boundary (Education Code 48204). In situations where residency is in question, the District or school will investigate by making a home visit. Residency verification is an annual parent responsibility. Falsification of information provided on this form will be grounds for immediate disenrollment.

Complete and sign this affidavit, attach copies of documents listed in Category 1 and Category 2 of the Acceptable Residency Verification Documents Chart listed below and return to the school's Registrar Office.

Student Name #1 (Print) Parent/Guardian Name (Print) Home Address: Number, Street, City, Zip
CURRENT School:

Student Name #2 (Print) Student Name #3 (Print) Student Name #4 (Print)
CURRENT School: CURRENT School: CURRENT School:

Select the option that best describes the residential housing situation of the parent/guardian:
HOMEOWNER RENTER CO-RESIDENT

NOTE: The District defines CO-RESIDENT as a parent/guardian who shares a home with another individual or family member (other than a spouse) who is the primary resident/owner. If you are a Co-Resident, who cannot provide proof of residency as listed below, you MUST submit this Residency Verification Affidavit along with the Co-Residency Supplemental Affidavit in the following section.

Acceptable Residency Verification Documents Chart

Category 1 - Select One (Please check document to be provided)	Category 2 - Select One (Please check documents to be provided)
<ul style="list-style-type: none"> <input type="radio"/> SDG&E Utility Service Billing Statement <input type="radio"/> SDG&E Letter of Residency <input type="radio"/> Letter from the Lessor and a Signed Copy of the Current Rental Agreement/Addendum Stating that Utilities are Included 	<ul style="list-style-type: none"> <input type="radio"/> Cable Service Billing Statement <input type="radio"/> Property Tax or Income Tax Document <input type="radio"/> Residential Water Service or Waste Management Billing Statement <input type="radio"/> Payroll Stub <input type="radio"/> Social Services Document

I have read the District residency verification policy. I understand students are required to prove residency during their initial enrollment and annually thereafter. I understand students will not be enrolled without at least two (2) separate documents to verify residency; one from Category 1 and one from Category 2 as outlined in the Acceptable Residency Verification Documents Chart listed above. I understand documents must be current and include the parent/guardian name and home address. I declare under the penalty of perjury that the above residency information is true and correct and that documents have not been altered; except blacked out confidential and personal details within a specific document if necessary. I agree to notify the school within (5) days of changing residency status of myself and/or my child and will provide new proof of residency or withdraw my child if the change is outside of the SDUHSD boundary.

Parent/Guardian Name (Print) Signature of Parent/Guardian Date

CO-RESIDENT SUPPLEMENTAL AFFIDAVIT

To be completed ONLY by individuals who are in a Co-Resident housing situation.

Home Address: Number Street City, Zip

Student Name (Print) Parent/Guardian Name (Print)

The primary resident/owner of the home address listed above must sign below and provide a copy of the following items:

- Valid California driver's license/ID card or Government issued document with photo ID
- Category 1 and Category 2 documents listed in the Acceptable Residency Verification Documents Chart

I declare, I am the primary resident/owner of the address listed above and that the parent/guardian listed reside with me at least (5) days per week. I further declare that all information provided in this affidavit, including information provided by the parent/guardian is true and correct. I understand that home visitation and/or residency verification is a part of a periodic process and will submit the required pieces of evidence to verify my residency. I agree to notify the San Dieguito Union High School District if there is any change in the residency status of the persons listed above or myself. I declare and certify, under penalty of perjury, that the foregoing is true and correct.

Primary Resident /Owner Name (Print) Signature of Primary Resident/Owner Date