



Residency Verification Form

For continuing students who have moved or whose address has changed

The Saddleback Valley Unified School District may ONLY enroll students whose Parent(s) or Guardian(s) reside within school district boundaries (Education Code 48204). This form has been provided to help us verify the location of your residence. In cases in which residency is in question, the Office of Pupil Services can investigate by making a home visit. **Residency verification is a parent responsibility and falsification of information provided on this document will be grounds for immediate cancellation of enrollment.** School site administration has the authority to approve/deny requests based on available space, unsatisfactory attendance and/or behavior. Please attach copies of the information requested below so that we may update your address and determine whether your student is eligible to stay at their current school.

Student Name (Last, First)	Date of Birth	Current Grade	Date
Current School			
Parent/ Guardian Name (Last, First)	Home Phone		Cell Phone
Old Address (street, city, zip)		School assigned to address	
New Address (street, city, zip)		School assigned to address	
<p>I wish to remain at current school <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><input type="checkbox"/> Please check the box below indicating the two forms you will submit as residency verification that reflect your name and the new current address you list above:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Current Electric bill <input type="checkbox"/> Current Gas bill <input type="checkbox"/> Current Water bill <input type="checkbox"/> Lease or Rental Agreement <input type="checkbox"/> I am a renter and do not pay utilities because they are included in my rent. <ul style="list-style-type: none"> <input type="checkbox"/> I will provide a letter from the lessor and/or a copy of the rental agreement stating that utilities are included. <input type="checkbox"/> I am renting/sharing a home (a completed Co- Residency Affidavit form must be attached) <ul style="list-style-type: none"> <input type="checkbox"/> I will complete and attach a Co – Residency Affidavit Form 			
Parent/Guardian Signature: _____			

OFFICE USE ONLY* OFFICE USE ONLY*** OFFICE USE ONLY*****

Approved Denied Comments: _____

Principal/Principal's Designee Signature: _____ Date: _____