

RESIDENCY – SHARED HOUSEHOLD AFFIDAVIT

Page 1 of 2

Clio Area Schools
430 N. Mill St.
Clio, MI 48420

This form must be on file with the district before student(s) can enroll. Parent or legal guardian must present a valid driver's license or other photo identification to the school office showing the correct address of residency.

To be completed by the parent or legal guardian and signed in the presence of a Notary Public. Please present driver's license or other photo identification to Notary Public.

I do hereby certify that the information supplied concerning residency is correct. I understand that at any point in time that I change addresses within the district or move out of the district, I must immediately notify **Clio Area Schools**

I am aware that if I have enrolled my child/children based on false or inaccurate residency information, I will be held liable for all tuition costs incurred.

Signature of Parent or Legal Guardian

Date

Parent or Legal Guardian's Driver's License Number

STATE OF MICHIGAN}
COUNTY OF _____}

Subscribed and sworn to before me, this _____ day of _____, 2021

Notary Public, _____ County, Michigan

My Commission Expires

RESIDENCY – SHARED HOUSEHOLD AFFIDAVIT

Page 2 of 2

To be completed by the resident and signed in the presence of a Notary Public.

Please present driver's license or other photo identification to Notary Public.

I, _____, declare that I live
Name of resident (please print)

within the **Clio Area School** boundaries at

Street Address City Zip

Home Phone Number and further declare that the

_____ family resides in my household. I

confirm that the family sleeps, eats and attends to their other household related needs at this address. The parent(s) or legal guardian(s) and their school age child/children's names residing at my home are stated below:

Name of Parent(s) or Legal Guardian(s)

Name of Student Grade D.O.B.

Name of Student Grade D.O.B.

Name of Student Grade D.O.B.

Signature of **Clio** Resident Date

STATE OF MICHIGAN}

COUNTY OF _____

Subscribed and sworn to before me, this _____ day of _____, 2021

Notary Public, _____ County, Michigan My Commission Expires

Office Use: Please attach a copy of the parent/legal guardian's driver license and a copy of the residence driver license along with the second proof of residency to this form. Submit original form to the Office of Instruction and copy in student CA 60.