

**Rialto Unified School District
RESIDENCY AFFIDAVIT**

This form is to be used to establish residency of a student when the student and his/her parent(s) or legal guardian reside in the home of someone else. This form must be completed and signed by the parent(s)/guardian and the person in whose home the student and his/her family are residing. Proof of address of the person with whom the student resides is required.

Statement of Parent(s) or Legal Guardian

Student Name _____ Student's Date of Birth: _____

I, _____, state that my child(children) and I reside on a full-time basis at the
Parent/Guardian Name

following address in accordance with Education Code 48204.1:

Street Number and Name

City

Zip Code

We reside with the person listed below.

Should my residency change, I will notify my child's school immediately.

My signature certifies that all information provided on this affidavit is true and accurate.

Parent/Guardian Signature: _____ Date: _____

Statement of Person with Whom the Student and His/Her Parent(s)/Legal Guardian Reside

I, _____, hereby certify under penalty of perjury that the above named student and his/her parent(s)/guardian reside with me on a full-time basis at the following address:

Street Number and Name

City

Zip Code

Signature: _____ Date: _____
(Proof of address and picture I.D. required for person signing this section of the form.)