

Thomaston Public Schools

P.O. Box 166
Thomaston, CT 06787
(860) 283 - 4796

Student Residency Questionnaire

I. Student Information *(Please Print)*

Student's Legal Name: _____
(Last Name) (First Name) (Middle Name)

Date of Birth: _____ Gender: _____

Current Address: _____
(Street) (City) (Zip)

Home Phone: _____

The above named student is in (will be in) grade _____ in the 20__ - 20__ school year.

Two (2) of the following documents evidencing the current residence address of the person with whom student is residing (or of the student if student is 18 or older or an emancipated minor) must be submitted along with a copy of Driver's License or Passport in addition to this questionnaire:

- Dated and unexpired rental agreement showing student(s) name
- Fully-executed escrow papers or mortgage commitment/agreement/deed
- Current utility or telephone bills
- Notarized letter from landlord or homeowner acknowledging parent/guardian's and student's current residence

For Transfers Only

Current School (send records) _____ New School _____

II. Parent/Guardian Information:

Parent/Guardian #1

Name: _____ Mother Father Legal Guardian

Current Address: _____

Employer: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Make and Year of Car: _____

License Plate Number: _____ City and State Vehicle is Registered: _____

Parent/Guardian #2

Name: _____ Mother Father Legal Guardian

Current Address: _____

Employer: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Make and Year of Car: _____

License Plate Number: _____ City and State Vehicle is Registered: _____

III. Sibling Information:

Name: _____ Relationship to Student: _____ Date of Birth: _____

Address: _____ School: _____

Name: _____ Relationship to Student: _____ Date of Birth: _____

Address: _____ School: _____

Name: _____ Relationship to Student: _____ Date of Birth: _____

Address: _____ School: _____

Name: _____ Relationship to Student: _____ Date of Birth: _____

Address: _____ School: _____

IV. Student Living with Parent(s)/Guardian(s)

(If completing this section complete Form A)

1. Does the student reside with all of his/her biological or adoptive parents or legal guardians? Yes No

2. If the answer to Q1 is no, who is/are the *custodial* parent(s) or guardian(s)?

3. If the answer to Q1 is no, who is/are the *noncustodial* parent(s) or guardian(s)?

4. If the answer to Q1 is no, what are the arrangements regarding custody? (Please provide copies of any supporting documentation from the court)

V. Student Living Separately from Any Parents/Guardians
(if completing this section complete Form B)

If the student does not live with a parent or legal guardian listed above in section II, please complete this section. Otherwise, please leave blank and complete the remaining sections.

1. Who is the student living with? Please state all persons residing with student.

2. What is the relationship of this/these person(s) to the student?

3. Why is the student residing with this/these person(s)?

4a. Are you providing financial or other compensation to this/these person(s)? Yes No

4b. If yes: What form of compensation? _____

In what amount? _____

For what purpose(s)? _____

5. Who will be responsible for the discipline and control of the student?

6. Who will be financially responsible for the student's health, welfare and educational needs?

7a. Does the person listed above, or do any of these persons listed above, have custody of the student?

Yes No

7b. If yes, which person(s) have custody and what was the reason for the transfer of custody to this/these person(s)?

7c. If yes, for how long is it anticipated that this arrangement is intended to last?

8a. Will the student spend time overnight at a residence outside of the Town of Thomaston?

Yes No If yes, please provide address(es):

8b. If yes, how much time will the student be spending at the above address(es)?

Weekends School Vacations Weeknights Other:

9. Is there anything else the school needs to know about this living arrangement?

VI. Parent/Guardian & Student Living Together at the Home of a District Resident
(if completing this section Parent/Guardian must complete Form B and District Resident must complete Form C)

If the student lives with a parent or legal guardian listed above in section II, please answer the following questions:

1a. Do you own the residence in Thomaston at which you and the student are living? Yes No

1b. If the answer to Q1a is no, do you rent at the address where you are living? Yes No

1c. If the answer to Q1b is no, are you and the student residing with a person or persons who are residents of Thomaston? Yes No

If the answer to Q1c is **Yes**, please answer the following questions:

2. Please provide the name(s) and address of the Thomaston resident(s) with whom you are residing:

3. Why are you and the student residing with the Thomaston resident(s)?

4. For how long is it anticipated that this arrangement will last? _____

5. Are you providing financial or other compensation to this/these person(s)? Yes No

If yes: What form of compensation? _____

In what amount? _____

For what purpose(s)? _____

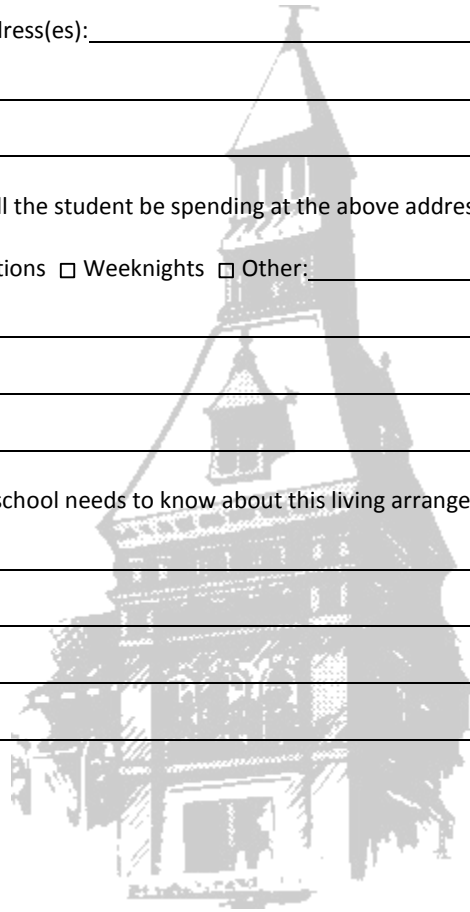
6a. Will student spend time overnight at a residence outside of the Town of Thomaston? Yes No

If yes, please provide the address(es): _____

6b. If yes, how much time will the student be spending at the above address(es)?

Weekends School Vacations Weeknights Other: _____

7. Is there anything else the school needs to know about this living arrangement?



**RESIDENCY AFFIDAVIT
OF PARENT / GUARDIAN
(If Student residing with Parent / Guardian)**

I, _____ hereby certify that _____
(Name of Parent / Guardian) (Student Name)
is my _____, and resides with me _____ days and _____ nights per
(Relationship) (#) (#)
week at _____
(Address & Telephone No.)

I further certify that the information and documentation provided to the District regarding the above-named student to verify the residency of that student is true and accurate and I understand and acknowledge that I am representing that my child is entitled to free school accommodations in the Town of Thomaston by virtue of his/her having a legal residence at the address provided. I agree to notify the District of any change of address within 15 days of that change. I understand that the District may investigate the truth or accuracy of any statement in this affidavit or any information or documentation provided to the District regarding the student. I understand that if statements in this affidavit or information or documentation provided to the District regarding the student are determined to be untruthful or inaccurate, the student may be denied school accommodations and disenrolled from the District. I understand that if the above-named student is found not to be a resident of the District and not entitled to school accommodations in the District, I may be liable for the cost of tuition for the student's school attendance in the District while not entitled to school accommodations. I also understand that a perjured or fraudulent statement may lead to criminal prosecution under the criminal statutes of the State of Connecticut.

THIS AFFIDAVIT MUST BE SIGNED IN THE PRESENCE OF A NOTARY

SIGNATURE: _____

DATE: _____

State of Connecticut
County of _____

Subscribed and sworn to before me this
_____ day of _____ 20 _____

Notary Public

My Commission Expires: _____

**RESIDENCY AFFIDAVIT
OF PARENT / GUARDIAN
(If Student residing with District Resident Other than Parent / Guardian)**

I, _____ hereby certify that _____
(Name of Parent / Guardian) (Student Name)

is my _____, and resides with _____
(Relationship) (Name)

at _____
(Address & Telephone No.)

The above-named student resides there _____ days and _____ nights per week, and such residence is permanent, not provided in exchange for pay, and not provided for the sole purpose of obtaining school accommodations for the student in the District.

I further certify that the information and documentation provided to the District regarding the above-named student to verify the residency of that student is true and accurate and I understand and acknowledge that I am representing that my child is entitled to free school accommodations in the Town of Thomaston by virtue of his/her having a legal residence at the address provided. I agree to notify the District of any change of address within 15 days of that change. I understand that the District may investigate the truth or accuracy of any statement in this affidavit or any information or documentation provided to the District regarding the student. I understand that if statements in this affidavit or information or documentation provided to the District regarding the student are determined to be untruthful or inaccurate, the student may be denied school accommodations and disenrolled from the District. I understand that if the above-named student is found not to be a resident of the District and not entitled to school accommodations in the District, I may be liable for the cost of tuition for the student's school attendance in the District while not entitled to school accommodations. I also understand that a perjured or fraudulent statement may lead to criminal prosecution under the criminal statutes of the State of Connecticut.

THIS AFFIDAVIT MUST BE SIGNED IN THE PRESENCE OF A NOTARY

SIGNATURE: _____

DATE: _____

State of Connecticut
County of _____

Subscribed and sworn to before me this
_____ day of _____ 20 _____

Notary Public

My Commission Expires: _____

**RESIDENCY AFFIDAVIT
OF DISTRICT RESIDENT
(If Student residing with District Resident Other than Parent / Guardian)**

I, _____ hereby certify that _____
(Name) (Student Name)

resides with me _____ days and _____ nights per week at
(#) (#)

(Address & Telephone No.)

The above-named student's residence with me is permanent, provided without the receipt of pay or any other compensation, and not provided for the sole purpose of obtaining school accommodations for the student in the District.

I further certify that the information and documentation provided to the District regarding the above-named student to verify the residency of that student is true and accurate and I understand and acknowledge that I am representing that the student is entitled to free school accommodations in the Town of Thomaston by virtue of his/her having a legal residence at the address provided. I agree to notify the District of any change in the student's residency within 15 days of that change. I understand that the District may investigate the truth or accuracy of any statement in this affidavit or any information or documentation provided to the District regarding the student. I understand that if statements in this affidavit or information or documentation provided to the District regarding the student are determined to be untruthful or inaccurate, the student may be denied school accommodations and disenrolled from the District. I understand that if the above-named student is found not to be a resident of the District and not entitled to school accommodations in the District, I may be liable for the cost of tuition for the student's school attendance in the District while not entitled to school accommodations. I also understand that a perjured or fraudulent statement may lead to criminal prosecution under the criminal statutes of the State of Connecticut.

THIS AFFIDAVIT MUST BE SIGNED IN THE PRESENCE OF A NOTARY

SIGNATURE: _____

DATE: _____

State of Connecticut
County of _____

Subscribed and sworn to before me this
_____ day of _____ 20_____

Notary Public

My Commission Expires: _____

For Office Use Only

In order to verify district residence, parent(s) or guardian(s), or the student if the student is 18 or older or an emancipated minor, must sign above, provide two documents from category 1 listed below, a copy of Passport or Driver's License, as well as submit the Student Residency Questionnaire.

1. Copy of three of the following at address within the district in the parent's, guardian's or 18 or older or emancipated minor student's name:
 - Dated and unexpired rental agreement showing student(s) name
 - Fully executed escrow papers or mortgage commitment/agreement/deed
 - Current utility or telephone bills
 - Notarized letter from landlord or homeowner acknowledging parent/guardian(s) and student's current residence
2. Current Passport or Driver's License (copy)
3. Residency affidavits to be filled out by parent/guardian(s) and/or person(s) with whom student resides.

Documents seen by: _____ on _____.

Thomaston School System Staff Member

Date