



Administrative Form 5014
RESIDENCY AFFIDAVIT

As the parent/guardian of _____
Student's Name

_____, _____, I hereby declare under
Grade Date of Birth

penalty of perjury that I reside with my son/daughter/ward at:

Student's Address City Zip

Falsifying this address will result in immediate withdrawal from the school.

Parent/Guardian Name Date

Parent/Guardian Signature () Home Phone Number