Anne Arundel County Public Schools | Department of Student Support Services | Office of Student Services



Tenant Residence Verification Disclosure Form

*This form must be completed and submitted to the school* ***annually****.*

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| **1. This section is to be completed by the parent/legal guardian of student(s) being registered:** | | | | | |
| In addition to a copy of the homeowner/renters documentation as described in #2, below, please provide:  T**wo supporting documents in the parent/guardians name and dated within the past 60 days must be provided to the school.** The individual enrolling the student(s) must provide two additional forms of documentation as described below in the individual’s name at the individual’s current residence within 30 days of enrollment. If the student(s) has resided at the address for 30 days or more, the documentation is due at the time of enrollment or reverification. A supporting document is a: utility or cable bill or work order displaying both the service and mailing address, bank statement, pay stub, W-2 form or form 1099, Commercial Driver’s License, or any govern-  ment-issued documentation such as a social security check, domestic relations/child support check, Department of Social Services food stamps or Community Medical Assistance letter, or unemployment award letter.  **It is important for you to know that any person who willingly makes misrepresentation may be subject to a penalty payable to the county for three times the pro-rate share of tuition** for the time the child fraudulently attended a public school in Anne Arundel County. The basic tuition rate is approximately $45 per day ($8,000 for the year). Please contact the Office of Student Services at 410-222-5322 for additional information regarding tuition.  I attest herein that my family will be residing at the following address and that this address is not being claimed only for the purpose of enrollment in this school district or for child care:  Street Address (apt. #) City State Zip Phone  Please note: A review of public databases may be made to verify this information.  Unannounced home visits may also occur.  Parent’s/Guardian’s previous address:  Street Address (apt. #) City State Zip Phone  Please complete the chart below to reflect the names of those who will be residing at the new address: | | | | | |
|  | **Name(s): Parent(s)/Custodian(s)/Guardians(s)** | **Name of Child(ren)** |  | **Child’s Birthdate** |  |
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| Parent’s/Guardian’s Signature | | | Date | | |
| **2. This section must be completed by the homeowner or renter of the house/apartment.** | | | | | |
| I, , attest that the persons listed above are residing with me at the address provided above. **I understand that Maryland state law requires that a copy of a Deed, Mortgage Documents, or Rental Agreement along with a utility bill must be on file for each student enrolling in a Maryland public school. I will provide copies of those items to my tenant so that school registration of the child(ren) listed above can be completed.**  I also understand that my home may be visited by a residency verifier.  Signature of homeowner/lease holder:  **Sworn and subscribed to me this day of , 20 .**  **My commission expires , 20 .**  Notary Public | | | | | |

Copies: Student Record | Parent | Homeowner/Renter | PPW

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