

GRANDVIEW C-4 SCHOOL DISTRICT

AFFIDAVIT OF RESIDENCE

(Resident/Homeowner)

I UNDERSTAND THAT THE FOLLOWING INFORMATION WILL BE FULLY INVESTIGATED BY THE SCHOOL DISTRICT. (Resident/Homeowner, please initial that you have read this statement _____).

I, _____, am residing at:

(Resident/Homeowner)

(Address)

in the Grandview C-4 School District. I hereby attest that the following

Parent/Legal Guardian _____ and his/her children

have been residing with me at the above address since _____.

Child/Children's Legal Name(s)

Grade

School

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I have provided accurate and truthful information to the best of my knowledge, information and belief. I have not knowingly withheld, concealed, or misrepresented any information that would have a material bearing upon the eligibility of the above child(ren) to attend Grandview C-4 School District.

Further, I understand that persons making a false affidavit or false requirements may be subject to prosecution for the offense of submitting false residency information. Violators may be charged with a **misdemeanor** and, upon conviction, may be **jailed and/or fined**. I am aware that the district will vigorously investigate and prosecute every violation.

Finally, I acknowledge that, if investigation reveals that I did not provide true information, the above child (ren) will be withdrawn from Grandview C-4 School District and I may be obligated to pay any tuition monies then due.

I am at least eighteen (18) years of age and I state that all statements made herein are made under oath and are true and correct based upon my personal knowledge and belief.

Signature of Resident/Homeowner

Home Phone #

Cell Phone #

Work Phone #

STATE OF MISSOURI

COUNTY OF JACKSON

On the _____ day of _____, 20____, appeared _____

did say that he/she has read the foregoing and states that it is true and correct to his/her best information and belief.

My Commission Expires: _____

Notary Public