

**AGAWAM PUBLIC SCHOOLS
CERTIFICATION OF STUDENT RESIDENCY**

School: AHS JHS Doering Clark Granger Phelps Robinson ECC

This certification is required if the student is living in the home of an Agawam adult who is not his/her parent or guardian. This form must be completed even if the parent and/or guardian is living with the student in this Agawam residence. It will expire at the end of each school year.

Please be aware that M.G.L. c. 76, §5 allows the School Committee to obtain the full cost of any student's education from any adult who enrolled a student in the Agawam Public Schools, knowing that the student was not a resident.

NAME OF SCHOOL _____

STUDENT'S FULL NAME _____

RESIDENCE _____

DATE OF BIRTH _____

I understand that the student whose name appears above must actually be residing in the Town of Agawam and has an intention to remain there in order to attend the Agawam Public Schools.

As the adult with whom this student is now residing at the address shown above, I understand that the activity listed below indicates residency and that the above-named student does engage in this activity to the extent indicated below and therefore is a resident of the Town of Agawam.

I also understand that I must notify school authorities of any changes of address.

Please complete the following for students in all grades:

The student returns to the address listed in this certification at the end of each school day and spends the evening/night there.

Yes _____

No _____

Signed under the pains and penalties of perjury this ____ day of _____, 20____
Month Year

Printed name of adult responsible for student

Signature

On this ____ day of _____, 20____, before me, the undersigned Notary Public, personally appeared _____ (name of document Signer), proved to me through satisfactory evidence of identification, which were _____, to be the person whose name is signed on the preceding or attached document in my presence.

Official signature and seal of notary

Notary Commission expiration date