

Newport School District #56-415

P.O. Box 70
1380 W. 5th Street
Newport, WA 99156

Phone: (509) 447-3167
Fax: (509) 447-2553
www.newport.wednet.edu

RESIDENCY VERIFICATION FORM

Washington law generally requires schools to be open to the admission of all persons between the ages of 5 and 21 residing in that school district. (RCW 28A.225.160). The Newport School District ("District") is required to take appropriate steps to ensure that students attending our schools satisfy applicable laws. This Residency Verification Form must be completed, signed and submitted with appropriate documentation demonstrating compliance with Washington's residency laws.

(Initial) I understand that I must submit proof of residence (mortgage statement or lease agreement, current utility bill, or property tax statement). *If you are living with someone else, the owner(s) or occupant(s) at the residence listed must sign this document verifying that you are living at their listed residence and they must submit verification that it is their residence/property.
If applicable, please see the bottom of the next page for signature.

(Initial) My child(ren) resides with me at the indicated address primary residence on the enrollment form.
➤ NOTE: If your child(ren) does not reside with you at least four (4) nights per week at the indicated address, please initial here _____ and provide a written explanation of where and with whom your child resides each day of the week.

(Initial) I agree to notify the District/School within (5) days when I change my residence or that of my student to a new address, either within or outside the District.

(Initial) Home visitation and/or other residency verification is part of a periodic process to confirm current residency status.

(Initial) The District will investigate cases where it has reason to believe that residency status has changed and/or false information has been provided, which may include the use of law enforcement to verify residency status. Verification may include home visits.

(Initial) Investigations that reveal students have enrolled on the basis of providing false information will be cause for revocation of the student's school assignment and disenrollment from the District.

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I certify the foregoing information to be true and correct, and that any and all copies of documents submitted to verify my residency are true and correct copies of the original documents, and that any and all documents submitted have not been altered except for the redaction of dollar amounts and account numbers, which is permitted for the purposes of this Residency Verification Form. Furthermore, I recognize that falsification or omission of information could result in modification of the school or program placement for this student including withdrawal from school.

Signature of Parent/Guardian

Date

* NOTE: The District presumes that the person who enrolls a student in school is the residential parent/guardian of the student. In circumstances of divorce in which legal and physical custody of the student is shared between two parents, parents must provide a certified copy of the court order (parenting plan) identifying each parent's respective legal and physical custody rights. You also must inform the District of any changes to the court order within five (5) days.

*If applicable, print name of resident with whom the students are residing: _____

Signature of resident with whom the students are residing that verifies they are living at their residence:

Date _____

Building Principal:

I have verified and confirmed required residency documentation.

Principal Signature

Date