

THOMPSON PUBLIC SCHOOLS

CERTIFICATION OF RESIDENCE
(For student living in other than a rental unit dwelling)

DATE: _____

RE: _____

As part of our residency process, we are requesting that you as the landlord/owner of or the family residing at the following residence providing this notarized statement verifying that:

Name of Student(s) _____

Name of Parent(s) _____

Reside at the following address: _____.

I, _____ certify that the named student(s) and parents
(local resident/relative/guardian, etc.) (cross out what does not apply)

() live/rent, or () reside with me at the above-listed address, in a home owned or occupied by me in Thompson.

I realize that if I make a false statement as to residency, I may be held liable for a share of the cost for the education of said student(s) if they, in fact, do not reside in **THOMPSON**.

I understand that my failure to respond to this request, or that a perjured or fraudulent statement may lead to the disenrollment of the above-named student(s). In addition, the parent(s) or adult student may be prosecuted under the criminal statutes of the State of Connecticut. I also understand that this document may be used as evidence in a court of law.

I agree to immediately notify the **THOMPSON** Public Schools if the above-described student(s) cease(s) to reside at this address.

Signed: _____ Date: _____

Signed and sworn to before me this ___ day of ___, 20__

Notary Public

If you have any questions regarding this form, please contact _____, **THOMPSON** Public Schools.