

Alief Independent School District
Houston, Texas

STATEMENT OF MULTI-FAMILY RESIDENCE
20____-20____

Parent Name _____

Address _____ Apt. # _____ ZIP _____

Owner/Lessee _____ Phone _____
(Proof of residence must be presented with form)

<u>NAME OF STUDENT(S)</u>	<u>SOCIAL SECURITY #</u>	<u>GRADE/CAMPUS</u>
_____	_____	____/____
_____	_____	____/____
_____	_____	____/____

WARNING: Falsifying information on this form is a violation of law (Texas Penal Code 37.10 and Senate Bill 1, Education Code 25.001). It is punishable by a fine of \$26 per day for each student for the time the student is enrolled on the basis of false information. Students are subject to immediate withdrawal.

I HAVE READ AND UNDERSTAND THE ABOVE REFERENCE TO TEXAS PENAL AND EDUCATION CODES. I ALSO UNDERSTAND THAT THE STUDENT(S) WILL BE PROVISIONALLY ENROLLED PENDING VERIFICATION OF RESIDENCY. PARENT MUST PROVIDE BUSINESS MAIL (addressed to parent at above address) WITHIN 30 DAYS OF TODAY'S DATE. THIS STATEMENT OF RESIDENCY IS FOR THE CURRENT SCHOOL YEAR ONLY AND MUST BE RENEWED EACH SCHOOL YEAR.

Signature of Owner/Lessee

Signature of Parent/Guardian

School Office use only

This Statement of Multi-Family Residence was signed before me by _____ and _____ on this the _____ day of _____, 20_____.

School Official

This Statement of Multi-Family Residence was signed before me by _____ and _____ on this the _____ day of _____, 20_____.

Notary Signature

Printed Name of Notary

Commission Expires