



This form is to be completed if residency requirements cannot be provided due to the fact that the parent and child(ren) are sharing a home with another person SEVEN DAYS A WEEK YEAR-ROUND.

I, _____, declare that I and my child(ren) listed below
Name (please print)

reside at the following address _____
Street Address, City & Zip Code

in the county of _____. * Phone _____
** If not Ingham County, the County must be contiguous to Ingham County to be eligible.*

Name of Student (Please Print) School Grade

Name of Student (Please Print) School Grade

Name of Student (Please Print) School Grade

Signature of Parent/Legal Guardian

Date

I, _____ declare/certify that I am the primary resident/owner at the
Owner, Lease-holder (please print)

address listed above and that the above mentioned adult(s) and student(s) reside with me on a full-time basis (seven days a week year-round.)

Homeowner name (Please print)

Signature of Home Owner or Lease-holder

Date: _____

***Proof Of Residency is required from the home owner or lease holder, in addition to this notarized form, when enrolling the above school aged children in Leslie Public Schools**

Notary Public

Subscribed and sworn before me this _____ day of _____, A.D., _____

Notary Public, State of Michigan

My commission expires