



SCHOOL ADMISSION/RESIDENCY AFFIDAVIT

Statement of Inability to Provide Verification of Residency in Attendance Zone

STATE OF IDAHO, KOOTENAI COUNTY

I, _____, being sworn on oath depose and state
 (Name of Residence Owner/Lessee)
 that I reside at the following address and have provided proof of residency.

Physical Address of Residence	City	Zip Code
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I also swear _____ and his/her children
 (Name of Parent/Guardian)
 currently reside with me at this address and may use this address for the purpose of registration for this school year. If their place of residence should change during the school year, I understand the school office must be notified.

Name(s) of minor children: _____ Age: _____
 _____ Age: _____

Resident Owner/Lessee Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

Notary Public for Idaho Signature: _____

Residing at: _____

My commission expires: _____

Office Use Only:

Method of proving residency (Copy attached) _____

Information taken by: _____ Date: _____