

RESIDENCY

Residency is required for all registrations

IF YOU *OWN* YOUR RESIDENCE

You must fill out the Affidavit of Residency by Parent and have it notarized. You must also provide a mortgage statement AND a second proof of residency (see registration packet checklist).

IF YOU *RENT* YOUR RESIDENCE

You must fill out the Affidavit of Residency by Parent and have it notarized. Your landlord (owner of the property) must fill out the Affidavit of Residency by Landlord and have it notarized. You must also provide a lease or notarized letter from your landlord (owner of the property) with the parents' name, student's name, student's date of birth and address stating that you live there AND a second proof of residency (see registration packet checklist).

IF YOU LIVE WITH A FAMILY MEMBER/OTHER

You must fill out the Affidavit of Residency by Parent and have it notarized. The homeowner must fill out the Affidavit of Residency by Landlord and have it notarized. You must also provide a lease or notarized letter from the homeowner with the parents' name, student's name, student's date of birth, address stating that you live there, AND the homeowner must provide their mortgage statement AND a second proof of residency (see registration packet checklist).

THE HOMEOWNER MUST PROVIDE A MORTGAGE STATEMENT AND SECOND PROOF OF RESIDENCY.

SEE AFFIDAVITS IN THIS PACKET

**Lincoln Public Schools
135 Old River Road, PO Box 367
Lincoln, RI 02865**

Student Name: _____

Affidavit of Residency by Parent/Guardian

_____ appeared before me on the ____ day of _____, 20____ and after
Print Parent/Guardian Name

first being placed under oath, did depose, swear and affirm to the following facts:

1. I am the natural or adoptive parent or guardian of _____ whom I have physical custody and possession.
2. I currently reside at _____, which is located in the Town of Lincoln, Rhode Island.
3. _____ actually resides and lives with me at said address.
4. I acknowledge that an attendance officer or School Department designee may visit for the purpose of verifying such residence.
5. I acknowledge that this Affidavit is being submitted under oath to the Lincoln School Department for the purpose of determining whether _____ is eligible to attend school in the Lincoln School system.
6. In support of this Affidavit, I have attached certain exhibits which are true, accurate and correct.
7. All the information contained herein is true and accurate.

Parent/Guardian Signature

State of Rhode Island
County of Providence

OATH NOTARY

In _____, on this ____ day of _____, 20____, before me
(City/Town)
personally appeared _____ and after reading the above Affidavit and
(Name of Parent/Guardian)
after first being placed under oath, did swear to the truth and accuracy of said Affidavit.

Signature of Notary Public

Notary Commission Expires

NOTICE: If you provide false information under oath you will be referred for prosecution for perjury. A Person who is found guilty of perjury may receive up to twenty years in jail.

If you provide false information, the school district will commence in appropriate legal action to collect the value of educational services the student received. Such collection efforts will include attachment and levy of real estate, wages and personal property.

**Lincoln Public Schools
135 Old River Road, PO Box 367
Lincoln, RI 02865**

Affidavit of Residency by Landlord/Shared Tenancies/Owner

My name is _____ and I hereby depose and certify as follows:
(Landlord/Owner/Management Company of Residence)

Please complete all three items and sign below:

1. I am the owner/landlord/management company of property located at _____
(Address where parent lives)
2. _____, who is the parent or legal guardian of _____,
(Parent/Guardian or Student over 18) (Student Name)
leases property as their primary residence from me, in a tenancy at will, from month to month.
3. I hereby state that the party named above resides with me and/or at the address above.

Signed under the pains and penalties of perjury this ____ day of _____, 20____.

Landlord/owner/management company signature: _____

Print Name: _____

Print Address: _____

Telephone Number: _____

As the applicant submitting this Residency/Landlord Affidavit, I swear, under pains and penalties of perjury, that the information above is accurate and understand that the information contained in this legal affidavit is subject to verification by a residency investigator.

State of Rhode Island
County of Providence

OATH NOTARY

In _____, on this ____ day of _____, 20____, before me
(City/Town)
personally appeared _____ and after reading the above Affidavit and after
(Homeowner's Name)
first being placed under oath, did swear to the truth and accuracy of said Affidavit.

Signature of Notary Public

Notary Commission Expires

NOTICE: If you provide false information under oath you will be referred for prosecution for perjury. A Person who is found guilty of perjury may receive up to twenty years in jail.

If you provide false information, the school district will commence in appropriate legal action to collect the value of educational services the student received. Such collection efforts will include attachment and levy of real estate, wages and personal property.