



Student ID# _____

**Lawrence Public Schools
Student Residency Affidavit Form
(Landlord/Lease Holder to Complete)**

I, _____, hereby affirm and swear, under penalties of perjury, that the adults listed below and their children live in my residency at the following address:

Number and Street Name Apt#

City State Zip Code

Parents/Legal Guardians' Information:

First Name	Last Name

Students/Children's Information:

First Name	Last Name	DOB

I understand that enrollment of the students named above in the Lawrence Public School system is based on my statement above and that I agree to notify Lawrence Public Schools of any change in the residency of the above named students within three days of such change. Please be advised that Lawrence Public Schools may seek restitution from you, as allowed by M.G.L., should it be determined that this form is being used to circumvent any state or federal law, for the purpose of attendance in a particular school or in our district. This form must be accompanied by appropriate proof of residency by the individual signing the form.

Printed Name Phone Number

Signature Date

Subscribed and sworn before me on this _____ day of _____, 20__.
State _____ County _____ My commission expires on _____.
Witness my hand in official seal.
_____ Notary Public



Family Resource Center
 237 Essex Street, 4th Fl., Lawrence, MA 01840
 Department of Community, Family & Student Engagement
 (Phone) 978-975-5900 * (Fax) 978-722-8551 * (Website) www.lawrence.k12.ma.us

STUDENT RESIDENCY AFFIDAVIT OF PARENT/GUARDIAN
(Parent/Guardian to Complete)

I _____, residing at (street number, street name, and city/town):
 _____, MA do hereby state that the following is legally
 accurate:

1. I am the parent or legal guardian of _____
 (“student”), who’s date of birth is _____
2. I have legal authority to enroll the student listed above in school.
3. If I am not the biological parent of the student, I acknowledge that I am required to submit documentation verifying my guardianship/custody of the student. (i.e. Court Document or Caregiver Affidavit)
4. I certify that the address listed above is the primary dwelling for the student listed above and as such, sleeps in this home _____ nights per week. If less than seven (7) nights per week, due to joint custody, I acknowledge that this is the primary dwelling for my child and that she/he resides here more than 50% of the time. Court custody agreement must be provided. Other conditions I believe you should be aware of:

5. I acknowledge that LPS reserves the right to audit residency affidavits, such as this one, in accordance with LPS School Committee Policy J-5a. This may include requests for new or additional proofs of address or an unscheduled home visit by an LPS agent.

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

Signature of Parent/Guardian: _____

According to Massachusetts Department of Elementary and Secondary Education, the cost per pupil for Lawrence was \$14,886.90. Please be advised that Lawrence Public Schools may seek restitution from non-residents, as is allowed by M.G.L., for your child(ren)’s education.