

Gladewater ISD Shared Residence Affidavit

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. This affidavit must be recertified annually.

All sections must be completed and signatures notarized. DO NOT SIGN THIS FORM IF ANY OF THE STATEMENTS ARE INCORRECT. Evidence of false information will result in immediate withdrawal of the student(s) from school.

TO BE COMPLETED BY THE PARENT/GUARDIAN:

Student Name: _____ Birth Date: ____/____/____ Grade: ____

Student Name: _____ Birth Date: ____/____/____ Grade: ____

Student Name: _____ Birth Date: ____/____/____ Grade: ____

Full name of Parent/Legal Guardian: _____

Current Address: _____

☐ Temporary, begin date _____ ending date _____ ☐ Permanent Telephone: _____

Before the undersigned officer, and being first duly sworn, I depose and state as follows:

1. That I do not maintain a separate primary residence elsewhere.
2. That I understand that I must notify Gladewater ISD within 7 days if I, or any child listed, change residence.
3. That I understand that representatives of Gladewater ISD may visit my home to verify residence.
4. That I understand that making false statements or submitting false documentation is a violation of Texas Education Code 21.031 and a criminal violation of Texas Penal Code 37.10.

Signature of Parent/Legal Court Appointed Guardian

Date

TO BE COMPLETED BY HOMEOWNER:

I, (Homeowner or leaseholder) _____ declare/certify that I am the primary resident/owner at (Street, Apt, City, Zip) _____

and that the above mentioned adult and student(s) reside with me on a full time basis (seven days a week). I agree to notify Gladewater ISD if there is any change in the status of residence of the persons listed above. I understand that home visitation and/or residence verification is part of the process when residency is established by a Shared Residence Affidavit. I further agree to provide my proof of residence to Gladewater ISD.

Signature of Primary Resident/Owner

Date

I confirm that both the parent and homeowner, who is personally known to me or who has produced

_____ as identification, declared that the contents of this Affidavit are true and correct under penalties of perjury. Thus signed and sworn to before me on this ____ day of _____, 20 ____.

NOTARY PUBLIC SIGNATURE

NOTARY PRINTED NAME

(seal)