

Parent/Guardian Residency and Re-establishing Residency Checklist

*** Families must actually reside in the Town of Milton at the time of registration in order for students to attend the Milton Public Schools. ***

Student Name and Address: _____

Homeowners

___ Most recent mortgage payment (required)

Property Tax bill is obtainable through Milton Public Schools partnership with Town Hall

Renters

Provide the following document

___ Signed and Notarized Landlord Living Agreement to be completed by Owner/Landlord. (form follows in this packet)

OR

___ Signed and notarized Property Owner Certification Form to be completed by homeowner. (form follows in this package)

AND

Provide one (1) document from the list below

___ Copy of up-to-date lease signed and dated by both landlord and tenant

___ Most recent rent payment (cancelled check)

___ Most recent Section 8 Agreement

All Registrants (Homeowners and Renters)

Provide three (3) bills from the following list (Please provide entire bill dated within the past 60 days.)

___ Cable/Satellite TV/Internet

___ Electric

___ Gas or Oil

Provide two (2) documents with Milton address from the following list

___ Valid photo ID (license, MA ID) Must have current Milton Address

___ Bank Statement (dated within the past 60 days)

___ Homeowners or Renters Insurance policy

___ Auto Insurance

___ Car Registration

If you have recently moved a work order from the utility companies stating that your service has been ordered or installed will be accepted.

Provide affidavit of Residency (Only signature and date are required.) See attached.

Affidavit of Residency

I/we, the parent(s) or legal guardian(s) of _____, hereby certify as follows:
(Print student's full name)

1. I/we wish to enroll the above-named student in the Milton Public Schools. I/we understand that pursuant to Massachusetts law and Milton School Committee Policy, students who do not actually reside in the Town of Milton may not attend the Milton Public Schools. I/we acknowledge that I am/we are required to notify the above student's school, in writing, of any change in said student's address within five (5) calendar days of such change of address.
2. I/we understand that, absent of other information to the contrary, this affidavit will be relied upon by the Milton Public Schools for the purpose of determining the above student's eligibility to attend the Milton Public Schools on the basis of residency. If said student is enrolled in the Milton Public Schools upon the information contained within this affidavit and it is subsequently determined that the student does not actually reside in Milton, I/we understand that the student's enrollment in the Milton Public Schools will be promptly terminated and I/we will be jointly and severally liable to the Milton Public Schools for the student's tuition for the full academic year(s).
3. I/we further certify that I am/we are the parent(s) or legal guardian(s) of the above student.
4. I/we understand that the Milton Public School system reserves the right to investigate a prospective or current student's residency at any time. This investigation may include resubmission of documents and/or a home visit by a school or police official.
5. I/we understand that if I am unable to supply the requested residency documents I/we will be placed in a "Unique/Referral" status and will be subject to alternative documentation, investigation via home visit, and potentially a one on one meeting with the Assistant Superintendent.
6. Chapter 76, Section 5 of the Massachusetts General Laws provides:
"Every person shall have a right to attend the public schools of the town where he actually resides, subject to the following section. No school committee is required to enroll a person who does not actually reside in the town unless said enrollment is authorized by law or by the school committee. Any person who violates or assists in the violation of this provision may be required to remit full restitution to the town of the improperly-attended public schools. No person shall be excluded from or discriminated against in admission to a public school of any town, or in obtaining the advantages, privileges and courses of study of such public school on account of race, color, sex religion, national origin or sexual orientation."

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

Parent/Guardian #1

Parent/Guardian #2



**PUBLIC SCHOOLS
MILTON, MASSACHUSETTS 02186**

LANDLORD LIVING AGREEMENT

Landlord Name: _____

Landlord Address: _____

Landlord Phone #: _____

I hereby certify and swear under oath that I am the legal owner/renter of the property at: _____

I also certify and swear that (name of parents/guardians): _____

and their children (list all names): _____

_____ are my tenants and live at the above address.

- I agree that if the Milton Public Schools investigate and find these statements to be false, that I may be responsible for repayment of any tuition or educational costs due the Milton Public Schools for the education of the above referenced children.
- I agree that if the tenants listed above move out of the dwelling listed above, that I will notify the Milton Public Schools of this change of residence.

Signed under the pains and penalties of perjury: _____

(Owner/Landlord Signature)

By signing this form, the Landlord acknowledges that all number of tenants and bedrooms are in compliance with the MA State Building Code and/or Town of Milton Building Code.

(Print Owner/Landlord Name)

(Date)

Notary Public
stamp/signature



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PROPERTY OWNER CERTIFICATION FORM

Please use this form if you have family members residing with you whose children will be attending Milton Public Schools.

Property Owner Information

Name: _____

Relationship to family: _____

Address: _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

I am the owner of the property at _____, Milton, MA. and acknowledge that the following persons will be residing at the above address and the minor children will be registering for school in Milton:

Name of Parent(s)/Guardian(s): _____

Home Phone: _____ Cell Phone: _____ Email Address: _____

Please list all minor children living with the Parent (s)/ Guardian (s) listed above.

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Expected dates of residency for this family at the address listed above: From: _____ to: _____

I swear under the pains and penalties of perjury that the answers above are true and accurate. I understand that it is my obligation to inform the Milton Public Schools if there is a change in the residency of this family.

Signature of property owner

Date

Notary Public
Stamp/ signature

