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
Please provide a copy of your Property Tax Bill
And
1 more document from this list below:
Copy Of Deed
Settlement Statement
Most recent mortgage payment
Renters
Provide the following document
Signed and Notarized Landlord Living Agreement to be completed by Owner/Landlord. (form follows in this packet)
Signed and notarized Property Owner Certification Form to be completed by homeowner. (form
follows in this package)
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 Water
Provide three (3) 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) Excise Tax Bill Homeowners or Renters Insurance policy Auto Insurance Car Registration
Provide affidavit of Residency (Only signature and date are required.) See attached.
If you have recently moved a work order from the utility companies stating that your service has been ordered or installed will be accepted.

idavit o	of Residency	
I/we, t	the parent(s) or legal guardian(s) of(Print stud	hereby certify as follows
1.	I/we wish to enroll the above-named student that pursuant to Massachusetts law and Milton not actually reside in the Town of Milton may acknowledge that I am/we are required to not any change in said student's address within fivaddress.	n School Committee Policy, students who d not attend the Milton Public Schools. I/we tify the above student's school, in writing, c
2.	I/we understand that, absent of other informate relied upon by the Milton Public Schools for the eligibility to attend the Milton Public Schools denrolled in the Milton Public Schools upon the and it is subsequently determined that the student's enrollment in the terminated and I/we will be jointly and several student's tuition for the full academic year(s).	ne purpose of determining the above student on the basis of residency. If said student is information contained within this affidaving the following the most actually reside in Milton, I/when Milton Public Schools will be promptly ally liable to the Milton Public Schools for the second states.
3.	I/we further certify that I am/we are the pare student.	nt(s) or legal guardian(s) of the above
4.	I/we understand that the Milton Public School prospective or current student's residency at a resubmission of documents and/or a home vis	any time. This investigation may include
5.	I/we understand that if I am unable to supply be placed in a "Unique/Referral" status and w investigation via home visit, and potentially a Superintendent.	the requested residency documents I/we will be subject to alternative documentation,
6.	Chapter 76, Section 5 of the Massachusetts Ge "Every person shall have a right to attend the resides, subject to the following section. No so who does not actually reside in the town unless the school committee. Any person who violate may be required to remit full restitution to the schools. No person shall be excluded from or of school of any town, or in obtaining the advant public school on account of race, color, sex relationships to the school on account of race, color, sex relationships the school of the schoo	public schools of the town where he actual chool committee is required to enroll a person said enrollment is authorized by law or be or assists in the violation of this provision to the improperly-attended public discriminated against in admission to a public ages, privileges and courses of study of such
	Signed under the pains and penalties of perjur	ry on this day of, 20

Parent/Guardian #2

Parent/Guardian #1



LANDLORD LIVING AGREEMENT

Landlord Name:	
Landlord Address:	
Landlord Phone #:	
I hereby certify and swear under oath that I am the legal of	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 investigat false, that I may be responsible for repayment of a due the Milton Public Schools for the education of I agree that if the tenants listed above move out o will notify the Milton Public Schools of this change Signed under the pains and penalties of perjury: 	any tuition or educational costs If the above referenced children. If the dwelling listed above, that I I e of residence. [Owner/Landlord Signature]
By signing this form, the Landlord acknowledges that all a are in compliance with the MA State Building Code and/o	
(Print Owner/Landlord Name)	
(Date) Notary Public stamp/signature (must be raised)	



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:Ce	ll Phone:	Email Address:	
I am the owner of the property a that the following persons will b be registering for school in Milto	e residing at the abo	, Milton, M. ove address and the	A. and acknowledge minor children will
Name of Parent(s)/Guardian(s):			
Home Phone:	Cell Phone:	Email Address:	
Please list all minor children livi Name:			
Name:	Date of Birth:		
Name:	Date of Birth:		
Name:	Date of Birth:_		
Expected dates of residency for t	this family at the ad	dress listed above: F	From:to:
I swear under the pains and pena accurate. I understand that it is r a change in the residency of this	ny obligation to info		
Signature of property owner	Date		
	Notary Public Stamp/ signa (must be rai	ture	