**Sacramento City Unified School District**

 **Due by: \_\_\_\_-\_\_\_\_-\_\_\_\_\_ to:**

 **🞎 Student’s school 🞎 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \* \* Email final copies to: MonicaMc@scusd.edu

 **Verification of Address/Housing Status:**

 **Student(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **DECLARATION OF RESIDENCE (DOR)**

 **Falsifying residency is illegal**

**SECTION 1: Parent/Guardian- Complete A, B, & C**

 **A.** I, (print full name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am the (check one) [ ]  Parent/Legal Guardian [ ]  Non-legal guardian\*\*\*

 of the children below who are either currently enrolled in the following schools or are seeking enrollment in school. If seeking to enroll a child

 in school, I declare that we live within the Sacramento City Unified School District boundary with the intent/purpose of remaining there.

*(\*\*\* Non-legal guardians must immediately apply for a ‘Caregiver's Affidavit’ &* ***submit it with this document****. Ask District staff for information.)*

 List **ALL** of **YOUR**  school-aged children(students) and their most current schools, even if they are enrolled in another school district. (PRINT)

 First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_ School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_ School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_ School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_ School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **B**. **ADDRESS** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ #\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Move-in date** \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

 ***WHAT TYPE OF ADDRESS is this for the students? Check Primary/Permanent Residence OR Homeless (not both). Submit verification***

 **PRIMARY/ PERMANENT RESIDENCE**: A fixed, regular, & adequate address that is a primary/permanent residence.

 **Check one box below.****Submit verification.**

 Shared housing, roommates, room & board, and similar situations

 **Verification**: The owner/legal tenant of the address must complete the "Owner/Legal Tenant Affidavit” below & attach documents.

 Residential Hotel: The hotel is your long-term primary residence by choice, convenience, or as a live-in hotel employee

 **Verification**: Hotel receipt that includes hotel name, address, phone number, and your name, current dates of stay, room number

 Homeless Declaration: This Declaration and the student’s homeless status expire when the student moves from the housing

 indicated below or on June 30th of the current school year, whichever comes first. To submit a new Declaration call 916-277-6892.

 **HOMELESS**: Students **lack** a fixed, regular, & adequate nighttime residence, as indicated below. Similar situations may apply.

 **Check one box below & fill in blanks. Fill in C and Submit form to Enrollment Center.**

Temporarily Doubled-up: Moved in to a person’s home due to a loss of housing or financial problems (eviction, job loss, etc).

 Hotel/motel:Living in hotel/motel due to a lack of alternative adequate accommodations. Hotel name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Temporary Shelter**:** Name of shelter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ph\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Temporarily Unsheltered: Car, park, public space, abandoned buildings, travel trailer, campground, or similar settings.

***The "McKinney-Vento Homeless Assistance Act: Education for Homeless Children & Youths" provides protection for students***

 *If unable to submit the verification at this time, please talk to district staff about verification and/or conditional enrollment options.*

Unaccompanied Youth (runaways, abandoned, or not in the care of a parent/legal guardian): Contact the Homeless Program Coordinator

For information on homeless services: Monica McRho, Homeless Program Coordinator, Parker Family Resource Ctr & Homeless Services Office: 277-6892

**C. I declare, under penalty of perjury under the laws of California, that all information on this form is correct. I understand that falsifying**

 **residency for attendance & enrollment is illegal and will result in immediate disenrollment.**

 Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Msg Ph \_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_-\_\_\_-\_\_\_\_

**SECTION 2: Primary/Permanent Residence-OWNER/LEGAL TENANT AFFIDAVIT: To be filled out by the owner/legal tenant of address in Section 1**

 I declare, under penalty of perjury under the laws of California, that the individuals listed above reside at the address indicated in Section 1,

 and I am the owner/ legal tenant of that address. I understand that falsifying residency for attendance & enrollment is illegal.

 I have attached these 2 documents: **1)** a copy of my photo ID ***AND* 2)** **one** document from below, in my name at the address in Section 1:

 □ Utility bill within 30 days: SMUD,PGE,or Water □ Government agency letter within 30 days □ Current rental or lease agreement with landlord’s information

 □ Check or pay stub within 30 days □ Current voter registration □ Mortgage statement within 30 days or current property tax bill

 Owner/Legal tenant full name (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sign \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_-\_\_\_-\_\_\_

 HmPh \_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_ What is your relationship to students above: □ Relative □Friend □ Other:\_\_\_\_\_\_\_\_\_\_\_\_

***Note:*** *District staff may contact legal resident or visit address to verify student and parent/guardian reside at the address.*

**SCHOOL DISTRICT USE ONLY:** Staff (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Site \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_

**Verification Submitted:** □ Hotel/motel receipt

□ Owner/Tenant Affidavit. WITH □ Photo ID □ Utility bill □Govt. Ltr □ Rental Agreement □ Chk/pay stub □ Voter Reg. □ Mortgage/property tax bill

**Was a "Conditional Enrollment" issued?** \_\_\_ No \_\_\_ Yes (attach to DOR) *Comments:*

**Email or send by district mail, this form and all documents to: Monica McRho, Parker Family Resource Center (9/29/17)**



 Falsifying Residency is illegal

DECLARATION OF RESIDENCE **(DOR)**

**INSTRUCTIONS**

Dear Parent or Student:

You indicated you are living in housing in which you do not have the usual verification of address. Below is the *Declaration of Residence* (DOR) for families/students in situations such as yours. This document is required for enrollment and confirmation of housing status.

**Section 1**:

Complete A:

* Your name and relationship to student
* Student names and information

Complete B

* Full Address
* Move in date
* Check one (1) box for *Type of Address*
* If in a Primary/Permanent Residence, provide Verification as indicated.

Complete C: Signature, phone, date

**Section 2**: **For Primary/Permanent Residence-** **To be completed** **Only if you are living with others**: The Owner/Legal Tenant of the address will fill out the Affidavit at the bottom of the DOR and attach the required two (2) documents in his/her name.