

## Shared Residency Information & Items Needed for Shared Residency

All New Shared Residences must first make an appointment with Central Office for Approval. Contact Student Services beginning July 12, to schedule your appointment. 901-389-2497 Ext. 2500

Unless otherwise prohibited by law, in the case in which a student resides with his/her parents/legal guardians/custodians having lawful control of the student in the home of someone else, the following proof of shared residency must be provided in order to enroll a child in Arlington Community Schools.

## A. The owner of the home must accompany the parent/guardian and provide two (2) of the following items to prove the homeowner's residency:

- 1) Most recent MLGW or municipal water bill of the owner, renter or lessee of the home in which the student will reside during the current school year;
- 2) Mortgage statement or deed of the owner of the home in which the student will reside during the current school year;
- 3) Lease of the lessee of the home in which the student will reside during the current school year;
- 4) Rental Agreement of the renter of the home in which the student will reside during the current school year;
- 5) Real Estate tax receipt;
- 6) Public assistance/government benefits check, card, or papers;
- 7) In the event that two (2) of the items listed above cannot be provided, residency may be established by submitting other documentation deemed to be appropriate proof of residence by the department responsible for verifying residency.

## B. The parents/legal guardians/custodians having lawful control of the student claiming shared residency must provide two (2) of the following items listed below:

- 1) Car registration of the parent/legal guardian/custodians having lawful control of the student bearing the address at which the student will be residing during the current school year;
- 2) Voter registration of the parent/legal guardian/custodians having lawful control of the student bearing the address at which the student will be residing during the current school year;
- 3) Payroll stub of the parent/legal guardian/custodians having lawful control of the student bearing the address at which the student will be residing during the current school year;
- 4) Three (3) significant pieces of mail with a forwarding sticker bearing the address at which the student will be residing during the current school year;
- 5) Government Assistance Communication directed to the parent/legal guardian/custodians having lawful control of the student bearing the address at which the student will be residing during the current school year.
- 6) In the event that two (2) of the items listed directly above cannot be provided, residency may be established by submitting other documentation deemed to be appropriate proof of residence by the department responsible for verifying residency.

## ARLINGTON COMMUNITY SCHOOLS 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 <u>seven days a week year round</u>. This affidavit must be re-certified through the school administrator or designee 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 COMPLET	ED BY PAREN	IT(S)/GUARDIAN(S):						
Student:		First Name	Sex:	Шм Шғ	Birth Date: _		Grade:	
Last Na	me	First Name						
Student:			Sex:	Шм ШF	Birth Date: _	//	Grade:	
Last Na	me	First Name (Pleas	se list additional stu	dents on a sepa	rate sheet.)			
Derent (a) Nome		(			,			
Parent (s) Name:	Last Name			First Name			<del></del>	
	Last Name			First Name				
Address:				T ilot Hamo				
Telephone:		Cell Phone	e	Other Phone:				
This living arrange	ement is:	Temporary Duration: _		Permanent				
	erstand that h	only residence. I agre ome visitation and/or re					ge in the status of my established by an Shared	
Signature of Parer	nt/Legal Court A	ppointed Guardian	TN Dri	TN Driver's License/ID Card Number D			ate	
TO BE COMPLET								
l, (Owner Lease Hol	der Qualified rela	tive, Friend, Neighbor, etc.)	_, declare/certify th	at I am the prim	ary resident/ow	ner at		
(	,	,, , ,					s) and student(s) reside with	
Street) (City)			(Zip	(Zip) me on a full time basis (seven days a week				
home visitation a agree to provide	ind/or residend proof of <u>my re</u> I that if I fraud	ce verification is part of sidence to Arlington Cou	the process when ommunity Schools	n residency is e s.	stablished by	a Shared Resid	above. I understand that lence Affidavit. I further the amount of per pupil	
Signature of Primary Resident/Owner(s)			TN Driver's Lice	TN Driver's License/ID Card Number			ate	
	•	(-)						
_	,			oroonally annoa	a			
Onbefore me				Personally appeared			Name(s) of Signer(s)	
Name(s) of Signer Place Notary Sea		and acknowledged to	me that he/she/they e	executed the same	in his/her/their au	uthorized capacity(	subscribed to the within instrument (ies), and that by his/her/their	
		• ( )		der the laws of the	State of Tenness	,	ed, executed the instrument.	
				Signature				
				<u> </u>	Signati	ure of Notary Pu	ıblic	

Arlington Community Schools offers educational and employment opportunities without regard to race, color, national origin, religion, age, gender, or disability and adheres to the provisions of the Family Educational Rights and Privacy Act (FERPA).