SECTION I: STUDENTS

MERIDEN PUBLIC SCHOOLS MERIDEN, CONNECTICUT

CONFIDENTIAL

RESIDENCY AFFIDAVIT

The Meriden Board of Education, in compliance with Section 10-253(d) of the State of Connecticut, requires this form to be completed for any student who claims residence in Meriden, but is not residing with his or her parent(s) and whose parents are either residing or not residing in Meriden. This form is required when there is a question about the child's actual residence. The student, parent, and person with whom the student is living must fill out this form together.

Date_							
l.	Student's Name		() (;] -1] -)	DOB;			
		(Last)	(First)	(Middle)			
2.	Student's Address				(T), I, U)		
	(No. and Street)				(Telephone #)		
3.	Name of Person With Whom Student Lives						
	Relationship				— 		
	Address						
	Address (No. and Street)				(Telephone #)		
4.	Date Student Moved(Month)						
		(Mon	th)	(Day)	(Year)		
5	Student's Former Address						
		(No	and Street)	(Town)		(State)	
6.	Former School				Grade		
7.	Name of Student's Fath	ner					
	Father's Address						
		(No. and	Street)	(Town)	(State)	(Telephone #)	
8.	Name of Student's Mot	ther					
	Mother's Address						
		(No. and	Street)	(Town)	(State)	(Telephone #)	
9.	Name and Address of Student's Court Appointed Legal Guardian, if Applicable:				le:		