DESOTO INDEPENDENT SCHOOL DISTRICT AFFIDAVIT OF STUDENT RESIDENCE 2023–2024

The following document must be completed in order to provide proof of residency. The district may make reasonable inquiries to verify a person's eligibility for admission [FD (Legal)]. I have personal knowledge of each of the facts contained herein and know them all to be true and correct. I realize that any known falsification of the information set out in this affidavit is an offense under Section 37.10 of the Texas Penal Code and violation of the Texas Education Code 25.001 (H). I am the parent, guardian, foster parent, or person having lawful control or legal power of attorney over:

| Student Last Name | Student First Name | Student Middle Initial |
|---|------------------------|----------------------------------|
| | | |
| Student Date of Birth | Student Grade | School Student WILL BE ATTENDING |
| who is three years old and under the age of 21 on the first day of September of the year which admission is sought. The child (<i>is</i>) or (<i>is not</i>) currently under an order for placement in an <u>Alternative Education Program</u> or under an <u>Expulsion Order</u> . If the child is under any such order, please provide an explanation or a copy of the order. | | |
| The student above currently resides within the boundaries of the DeSoto Independent School District at: | | |
| Complete address (street, house #, Ap | ot. #, city, zip code) | |
| I am a resident of the DeSoto Independent School District currently residing within the boundaries of DeSoto Independent School District at the above address and hereby certify that all persons listed below reside with me in the DeSoto ISD attendance zone. I further certify that all information contained herein is true and correct: | | |
| Printed Parent/Guardian Name | P | arent Signature |
| Printed Resident Name | R | esident Signature |
| Previous address, current email, and current phone number of parent/guardian living with the house/lease holder: | | |
| Email | | none Number |
| Previous Address | | |
| If an ineligible student is enrolled in the District on the basis of information knowingly falsified by me on this form, I am liable to the District for the cost of the student's education. I also understand if residence is established in another district while school is in session, this enrollment form is invalid. If the student is residing outside of the district, a Selective Enrollment application can be considered. Failure to withdraw the student(s) in accordance with school board policy makes me liable to the District for the tuition cost of the days ineligibly enrolled. I must present a form of identification AND current and original utility (water, electricity, or gas) bill or lease indicating the address and resident's name as well as a form of identification for the parent/guardian of the student. By affixing my signature below, I attest that all of the information contained herein is true and correct. A parent/guardian may be required at any time to produce proof of residency. Note: For any of the instances listed above, withdrawal is possible if not adhered to. | | |
| Signature of Parent/Guardian | | Date |
| IN WITNESS WHEREOF, I hereunto set my hand this day of, 20 THE STATE OF TEXAS§ | | |
| COUNTY OF | § | |

Signature of notary