



Residence Verification Form

TO BE COMPLETED BY THE LANDLORD, RENTAL AGENCY, OR RESIDENT OF THE PROPERTY.

I, _____ and _____
Name of Homeowner/Apartment Lessee Name of Parent/Guardian

verify that _____ and the following children:

_____	Childs Name	_____	Child's Date of Birth
_____	Childs Name	_____	Child's Date of Birth
_____	Childs Name	_____	Child's Date of Birth
_____	Childs Name	_____	Child's Date of Birth

reside with me at the following address since: _____
Date

_____ House or Apartment Number Street Address

_____ City State Zip

and will remain at this address until _____. We further agree to notify the
Date
child's school immediately if the residence changes.

I certify under penalty of perjury under United States law that I know the contents of this verification form signed by me and that the statements are true and correct. I understand that any false written statement or misrepresentation as to my residency or parental or legal guardian relationship may be in violation of the criminal law, Title 11, of the Delaware Criminal Code. I acknowledge that I will be responsible for any costs incurred by the District as it relates to the investigation and proof of my statements made on this form.

Resident Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

ATTACH COPY OF RECENT ELECTRIC BILL OR SIGNED LEASE/SALES AGREEMENT