

**VERIFICATION OF RESIDENCY STATEMENT
AIEA HIGH SCHOOL**

School Year	Last	First Name	Middle	Grade
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In order to verify residency within the Aiea High School District for parents who are living with relatives, **two current documents** from the following checklist below must be provided, showing the **relatives' name and address in Aiea** (Post Office box numbers are not acceptable as residence address).

- _____ Rental/Lease Agreement
- _____ Utility bill
- _____ Deed to Home, Escrow papers, mortgage statement or property tax form

In addition to the two current documents listed above, the **Verification of Residency Statement-Notary Form** must also be completed by the owner of the property and notarized.

I, _____ the parent/guardian
(PRINT FULL NAME)
of _____
(STUDENT NAME)

declare under penalty of perjury that the above-name student resides at the address shown on the document indicated above and attached. I will notify the school within two weeks if residency changes and agree to provide a new residency proof and updated signed statement at that time. If I move outside the school district, a GE request must be filed in order to request continued attendance for this student.

I understand that this address is within the Aiea High School boundaries. I further understand that falsification of any information or document, either written or verbal, required for residency verification or the use of the address of another person without actually residing there may result in revocation of student enrollment. Falsification on a governmental agency application is a misdemeanor (HRS #710-1063).

The attached document/s show/s the name and address of the person/s enrolling that above-named student. If not the parent, **court papers are required for guardianship, or foster assignment for foster parent.**

Parent/Guardian/Caregiver/Other Signature: _____

Date: _____

VERIFICATION OF RESIDENCY STATEMENT
Notary Form
AIEA HIGH SCHOOL

Name of Family: _____
Parent First and Last Name

Name of Children attending Aiea High School:

Parent/Guardian/Caregiver/Other Signature: _____

Date: _____

I, _____, the owner/resident of

_____, AIEA, 96701, declare under penalty of perjury that the above-named person and family reside(s) with me at this address. I will notify the school within two weeks if their residency changes.

I understand that this address is within the Aiea High School boundaries. I further understand that falsification of any information or document, either written or verbal, required for residency verification or the use of the address of another person without actually residing there may result in revocation of student enrollment. Falsification on a government agency application is a misdemeanor (HRS #710-1063).

Signature: _____

Date: _____

Subscribed and sworn to before me

This _____ day of _____, 20____.

Notary Public, State of Hawaii

My commission Expires: _____