Residency Affidavit Packet Guidelines

- The Notarized Residency Affidavit form must be notarized by a Madison County Schools employee.

- Do not sign the form until told to do so by the notary.

- A Madison County Schools' employee will make a home visit to confirm your address and validate your enrollment status.

- The Residency Affidavit is only good for the current school year.

- Please fill out the Residency Affidavit in its entirety. Any incomplete sections will delay your student's enrollment.
RESIDENCY AFFIDAVIT CHECKLIST

Please submit all Residency Affidavit documentation **IN FOLLOWING ORDER** to allow them to be verified and returned to the school in a timely manner.

___ Residency Affidavit Application
___ Notarized Residency Affidavit
___ Student Residency Statement
___ Parent driver’s license
___ Homeowner’s driver’s license
___ Current Huntsville Utility Bill (in Homeowner’s name)
___ Homeowner’s Mortgage statement/*Lease agreement, Homeowner’s/Renter’s insurance or Homeowner’s property tax statement.

___ Parent additional documentation *(If parent is unable to provide any of the following, they must explain why in writing and call Student Services for an appointment. Student will not be enrolled until confirmed by Student Services.)*

___ W-2/Tax return
___ SSN/SNAP/TANF
___ Insurance statements
___ Car registration
___ Bank statements
___ Change of Address form

*Handwritten or typed letter leases **will not** be accepted.

***************MUST BE SIGNED BY ADMINISTRATOR***************
Madison County Schools
Residency Affidavit Application

THIS FORM WILL NOT BE APPROVED UNLESS ALL BLANKS ARE COMPLETED

Date: ________________________________

Applicant's Name: ________________________________

Child/Children: ________________________________

Previous Address: ________________________________

Previous School: ________________________________

Person with whom you will be residing with: ________________________________

Relationship: ________________________________

Address: ________________________________

City: __________________ State: ______ Zip Code: ______

List all persons living in the home:

Adults __________________ Children __________________

____________________ __________________

____________________ __________________

____________________ __________________

____________________ __________________

How long do you expect to reside at this address? ________________________________ (length of time must be specified)

Assurances:

1. I attest that this request to attend ___________________________________ School is not primarily related to
   attendance at a particular school, nor is this affidavit being completed for the purpose of participating in athletics at a
   particular school or any other similar reason.

2. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent
   school nor is currently subject to a recommendation for long-term suspension or expulsion from his/her most recent school nor
   under indictment for criminal charges.

3. I understand that my child/children is/are expected to arrive on time to school each day. Should my child/children arrive late
   more than 10 times, I understand the principal may refer me to the District Attendance Staff and may make a personal visit to
   the address above to verify residence at the address and/or conduct interviews with students, staff, or community members.

4. I understand that bus transportation is provided and my child/children are eligible to ride the bus daily, unless otherwise
   prohibited by the principal or designee.

5. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to
   immediately notify the local school.

If at any time your residence changes or this information is found to be inaccurate, your child shall be withdrawn from
the school.

Parent's Signature ____________________________ Date: ____________________________

The Superintendent or his/her designee may verify the facts of this affidavit by audits either before or at any time after the child has
been enrolled in the Madison County School System. The audit may include a personal visit by a school district employee at the
residence provided in this affidavit to verify the facts sworn to in this affidavit. If the Superintendent discovers fraud or
misrepresentation, the child shall be withdrawn from school and criminal charges may be filed.

Request: ________ Approved ________ Denied

Principal’s Signature ______________________________________________________

Verified at District Level: __________________________ Signature __________________________ Date: __________________________

Revised February 2018
Madison County Schools
Notarized Residency Affidavit

This form shall be completed for students seeking enrollment in Madison County Schools, who live with their custodial parent(s), but reside in the home of another adult. This form shall be completed by the adult with whom the student and custodial parent are living. **This form should be notarized at the enrolling school or by a school district employee.**

I, the undersigned, am over nineteen (19) years of age and competent to testify to the facts and matters set forth herein.

The student(s) whose legal name(s) is __________________________________________ AND his/her custodial parent whose legal name is __________________________________________ reside with me at the following address:

Name: __________________________________ Relationship: ____________________________

Address: ____________________________________________________________

City: __________________________ State: __________ Zip Code: ______________

Home Phone: __________________________ Work or Cell Phone: ____________________

**The following documents must be included as part of this affidavit:**

- Copy of homeowner’s driver’s license
- Copy of recent Huntsville Utility bill (in Homeowner’s Name)
- **One of the following** (documents presented for residency verification must include the same address as the accompanying utility bill):
  - Current lease / rental agreement
  - Current homeowner’s insurance policy
  - Current residential property tax statement or bill

__________________________________________
Signature of Affiant with whom student and custodial parent are living

The Superintendent or his/her designee may verify the facts of this affidavit by audits either before or at any time after the child has been enrolled in the Madison County School System. The audit may include a personal visit by a school district employee at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school and criminal charges may be filed.

State of ________________________, County of ___________________________

I, __________________________________________, a Notary Public for said county and state do hereby certify that __________________________________________ personally appeared before me this day and acknowledged the due executing of the foregoing instrument.

Witness my hand and Official Seal, this __________ day of __________, 2__________

________________________________________
Signature of Notary

Seal
Madison County Schools
STUDENT RESIDENCY STATEMENT

School: _______________________________ Date: _______________________________

Student Name: _________________________ Birth date: ___________ Grade: ___________

Please list all of YOUR preschool and school-aged children currently living with you (PLEASE PRINT):

Name: ___________________________ Birth date: ___________ School: _______________

Name: ___________________________ Birth date: ___________ School: _______________

Name: ___________________________ Birth date: ___________ School: _______________

Current Address: ___________________________________________________________

Previous Address: __________________________________________________________

Previous School Attended: ___________________________________________________

Do any of these situations apply?

☐ 1. Temporarily staying with others due to loss of previous housing, economic hardship, or similar reason. (A full explanation of the situation is required to determine the appropriate enrollment steps to take).

   What caused the loss of housing, economic hardship, or similar reason? (Use the back of this form if needed)

☐ 2. Eviction from previous housing

   Date of eviction: ____________________________
   Address of eviction: __________________________

☐ 3. In a motel, hotel, campground or similar setting due to loss of housing or eviction.

   Name of motel, etc. __________________________

☐ 4. In an emergency or transitional shelter such as a homeless shelter, etc.

   Name of shelter, etc. __________________________

☐ 5. In a car, park, public building, or similar setting that is not designed for family housing

☐ 6. Unaccompanied Youth (any child under the age of 19 not in the physical custody of a custodial parent)

   The information below must be completed by the youth or by the school official interviewing the youth (use back if needed).

   Where is the custodial parent? ____________________________

   Why is the youth not with the custodial parent? ____________________________

☐ 7. None of the above

How long do you anticipate the living situation to last? ____________________________

Signature: _______________________________ Phone Number: ____________________________

Revised February 2018