

## St. Lucie Public Schools Affidavit of Residence for Student Enrollment

District policy requires valid proof of residence for all students. In order to verify compliance with residency requirements, parents who cannot provide the required proof of residence directly because they are sharing a home with another person ("Primary Resident") must (1) complete an Affidavit of Residence and (2) provide an affidavit from the Primary Resident verifying the parents' residency. Please read the following information carefully before signing and completing the affidavit. Also, **please note the Primary Resident must also provide appropriate proof of residence (see list of acceptable proof of address).**

**Both Parent and Primary Resident Must Read and Initial the following:**

\_\_\_\_\_|\_\_\_\_\_ The St. Lucie County School District will actively investigate all cases where it has reason to believe false information has been provided on an affidavit, including the use of unscheduled home visits.

\_\_\_\_\_|\_\_\_\_\_ The District may refer cases in which false information has been intentionally provided to the State Attorney for the Nineteenth Judicial Circuit for further action and/or file civil action to recover damages incurred as a result of providing false information.

\_\_\_\_\_|\_\_\_\_\_ Persons who provide false information on an affidavit are subject to criminal prosecution for perjury, which is punishable as provided in section 837.02, FLORIDA STATUTES.

\_\_\_\_\_|\_\_\_\_\_ Persons who induce, obtain or otherwise solicit another person to provide false information on an affidavit are subject to the same criminal prosecution, fines, and imprisonment as the person directly committing perjury.

**TO BE COMPLETED IF PROOF OF RESIDENCY CANNOT BE PROVIDED BY THE PARENT DIRECTLY BECAUSE THE PARENT AND CHILD(REN) ARE SHARING A HOME WITH ANOTHER PERSON ("PRIMARY RESIDENT").**

All sections must be completed and the signatures of both the parent and the Primary Resident must be notarized. **DO NOT SIGN THIS FORM IF ANY OF THE STATEMENTS OR ANY OF THE ATTACHED DOCUMENTS VERIFYING PROOF OF RESIDENCE ARE INCORRECT.** Evidence that false information was provided will result in immediate withdrawal of the child from school.

This statement is provided to verify that \_\_\_\_\_  
(Parent or Legal Guardian)

resides at \_\_\_\_\_ in St. Lucie County with the school-aged  
Home Address City

children named below. Documents verifying proof of residence are attached to this statement.

**(see attached copy of a current documents verifying proof of address – each dated within the last 30 days).**

**Names of the children to be registered in St. Lucie Public Schools:**


(1) TO BE COMPLETED BY PARENT AND SIGNED IN THE PRESENCE OF A NOTARY PUBLIC:

The address listed above is my only residence. I agree to notify the St. Lucie County School District if there is any change in the status of my residency. I understand that home visitation and/or residency verification is part of a periodic process when residency is established by an Affidavit of Residence. I also understand that this Affidavit is valid for one school year only. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS AFFIDAVIT ARE BEING MADE UNDER PENALTY OF PERJURY, PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.

I swear (or certify) under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Signature of Parent Date

STATE OF FLORIDA  
COUNTY OF ST. LUCIE

Sworn to (or affirmed) and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by (name of adult):  
\_\_\_\_\_. He/she is \_\_\_\_ personally known to me, or \_\_\_\_ has produced  
\_\_\_\_\_ as identification.

NOTARY PUBLIC-STATE OF FLORIDA

Signature: \_\_\_\_\_ (SEAL)

(2) TO BE COMPLETED BY PRIMARY RESIDENT AND SIGNED IN THE PRESENCE OF A NOTARY PUBLIC:

I, declare I am the primary resident at the above address and the person(s) listed above resides with me on a full-time basis (seven days a week). I agree to notify the St Lucie County School District if there is any change in the status of the residency of the persons listed above. I understand that home visitation and/or residency verification is a part of a periodic process when residency is established by an Affidavit of Residence. I UNDERSTAND THAT THE STATEMENTS MADE IN THIS AFFIDAVIT ARE BEING MADE UNDER PENALTY OF PERJURY, PUNISHABLE AS PROVIDED IN SECTION 837.02, FLORIDA STATUTES.

I swear (or certify) under penalty of perjury that the foregoing is true and correct.

\_\_\_\_\_  
Signature of Primary Resident Date

STATE OF FLORIDA  
COUNTY OF ST. LUCIE

Sworn to (or affirmed) and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by (name of adult):  
\_\_\_\_\_. He/she is \_\_\_\_ personally known to me, or \_\_\_\_ has produced  
\_\_\_\_\_ as identification.

NOTARY PUBLIC-STATE OF FLORIDA

Signature: \_\_\_\_\_ (SEAL)

Acceptable Proofs of Residence include: One (1) Primary and One (1) Secondary or Two (2) Primary Proof of Address. Two (2) secondary proof of address WILL NOT be accepted.

\*ONE of the following documents is required as Primary Proof of address:

- |  |                           |                            |
|--|---------------------------|----------------------------|
| 1. Current utility bill – <b>within the last 30 days</b> | 3. Current mortgage deed  | 5. Mortgage payment coupon |
| 2. Builder's Contract (6 month completion)               | 4. Signed lease agreement | 6. Official rent receipt   |

\*ONE of the following documents is required as Secondary Proof of address:

- |  |                         |                     |               |
|--|-------------------------|---------------------|---------------|
| 1. Cable bill – <b>within the last 30 days</b> | 2. Voter's Registration | 3. Driver's License | 4. Cell Phone |
|--|-------------------------|---------------------|---------------|