



# SHARED HOUSING PROOF OF RESIDENCE

DEAR PARENT OR LEGAL GUARDIAN:

THE PROOF OF RESIDENCE PROCESS MUST BE COMPLETED AND RENEWED ANNUALLY. THE FOLLOWING PAGES MUST BE COMPLETED AND SUBMITTED TO YOUR CHILD'S SCHOOL IF YOUR FAMILY LIVES IN THE HOUSEHOLD OF ANOTHER FAMILY.

**HOMEOWNER/LESSEE PROOFS OF RESIDENCE REQUIREMENT:**

(PROOF OF ADDRESS DOCUMENTATION MUST NOT BE OLDER THAN 30 DAYS WHEN PRESENTED)

**ONE FROM THIS LIST:**

- Signed Lease agreement
- Mortgage statement
- Settlement statement

(ONLY IF CLOSED WITHIN THE LAST 30 DAYS)

**AND**

**ONE FROM THIS LIST:**

- Electric bill
- Water bill
- Land line phone bill
- Cable/satellite bill

**REQUIRED DOCUMENTATION FROM THE PARENT/LEGAL GUARDIAN:**

- A state or federally issued identification card
- Full-sized original birth certificate
- Valid South Carolina Certificate of Immunization
- A previous report card and/or withdrawal form from the school the student is leaving
- Proof of residence (details below)

**PARENT/LEGAL GUARDIAN PROOFS OF RESIDENCE REQUIREMENT:**

(PROOF OF ADDRESS DOCUMENTATION MUST NOT BE OLDER THAN 30 DAYS WHEN PRESENTED)

**ONE FROM THIS LIST:**

- Paycheck stub
- State/Federal Supported Services
  - DSS
  - SCDMV
  - SC Dept. of Employment & Workforce
  - Social Security Administration
  - SC Student Loan
  - SC Child Support Enforcement Division

**AND**

**ONE FROM THIS LIST:**

- Car insurance
- Bank statement
- Cell phone bill
- Medical bill

You will be given 30 days to provide proofs of residence unless your move occurred more than 30 days prior to enrolling. Proof of residence may be requested every 9 weeks/quarterly. Parent/guardians may also be required to provide proof that they are no longer residing at their previous address. This proof can be in the form of a letter from the previous landlord (on letterhead), a cancellation of service notice, or a notarized statement.

If you have any questions regarding the above address verification requirements, please contact the school office that serves your current address.

I understand and agree to the terms listed in providing the documentation for address verification. I also understand that documentation for address verification can be requested for any reason, and will be at the discretion of Richland One.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



# Residency Declaration Affidavit

(To be completed by Property Owner or Lessee)

Please include a copy of your purchase/lease agreement or deed

I, \_\_\_\_\_, certify that I am the owner/lessee of the residence/apartment located at \_\_\_\_\_. I further certify that \_\_\_\_\_ has established permanent or temporary residence in the aforementioned residence/apartment and, to the best of my knowledge, is not maintaining a separate residence elsewhere. The following children and adults live in my household:

All Adults in Household

All Children in Household

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that if it is found that I have willfully and knowingly provided false information in this affidavit to enroll a child in a school district for which the child is not eligible, I may be found guilty of a misdemeanor and, upon conviction, must be fined an amount not to exceed two hundred dollars (\$200.00) or imprisoned for not more than thirty (30) days. Additionally, I must be required to pay Richland One an amount equal to the current year's cost for educating the child(ren) during the period of enrollment.

I agree that Richland One may utilize all reasonable and appropriate means it has at its disposal to verify my residential address, and confirm that this affidavit is true and accurate.

Signature of Owner/Lessee

Print Name

Date

**\*\*DO NOT SIGN UNTIL YOU ARE IN FRONT OF A NOTARY\*\***

State of South Carolina County of Richland

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

(Seal) \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Notary Public



# Residency Declaration Affidavit

(To be completed by Parent or Legal Guardian)

I, \_\_\_\_\_, certify that I am the custodial parent/legal guardian of \_\_\_\_\_ and that I have established my permanent or temporary residency at \_\_\_\_\_. I also agree that if I move, I will notify Richland One immediately with my new residence information.

**I understand that if it is found that I have willfully and knowingly provided false information in this affidavit to enroll a child in a school district for which the child is not eligible, I may be found guilty of a misdemeanor and, upon conviction, must be fined an amount not to exceed two hundred dollars (\$200.00) or imprisoned for not more than thirty (30) days. I also understand that I will be required to withdraw the student(s) immediately, and must enroll him/her in the school district that serves my true residential address. Additionally, I will be subject to pay the current year's tuition cost equal to the amount of days my child(ren) were illegally enrolled in Richland One.**

I agree that Richland One may utilize all reasonable and appropriate means it has at its disposal to verify my resident address, and confirm that this affidavit is true and accurate.

<b>Signature of Parent/Legal Guardian</b>	<b>Print Name</b>	<b>Date</b>
<b>**DO NOT SIGN UNTIL YOU ARE IN FRONT OF A NOTARY**</b>		

State of South Carolina County of Richland  
Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.  
(Seal) \_\_\_\_\_ My Commission Expires \_\_\_\_\_  
Notary Public

<b>Signature of Parent/Legal Guardian</b>	<b>Print Name</b>	<b>Date</b>
<b>**DO NOT SIGN UNTIL YOU ARE IN FRONT OF A NOTARY**</b>		

State of South Carolina County of Richland  
Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.  
(Seal) \_\_\_\_\_ My Commission Expires \_\_\_\_\_  
Notary Public



## Consent Form for Release of Information to Support Affidavits of Residency in the District

I am an adult resident of the District enrolling a child to attend in the District pursuant to an affidavit provided for in S.C. Code Ann. § 59-63-31(1)(c). I hereby authorize Richland One to verify my address for the purpose of allowing my child or children to be enrolled or continue to be enrolled. The authorization to release such information would extend to establishments, including, but not limited to: Dominion Energy, Fairfield Electric, Palmetto Utilities, City of Columbia, Bellsouth, Spectrum, Time Warner Cable, Columbia Housing Authority, etc.

The information obtained by Richland One pursuant to this consent form will only be used by Richland One for enrollment verification purposes.

A photographic or FAX copy of this authorization may be deemed to be equivalent of the original and may be used as a duplicate original.

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Signature of Parent/Legal Guardian

Print Name

Date

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Signature of Parent/Legal Guardian

Print Name

Date

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Signature of Owner/Lessee

Print Name

Date