

WOODBIDGE SCHOOL DISTRICT

PROOF OF RESIDENCY

**Woodbridge Early Childhood
Education Center
Grades EC-2**
P.O. Box 2007
Greenwood, DE 19950
302-349-4010

**Phillis Wheatley
Elementary School
Grades 3-5**
48 Church Street
Bridgeville, DE 19933
302-337-3469

**Woodbridge Middle School
Grades
6-8**
307 Laws Street
Bridgeville, DE 19933
302-337-8289

**Woodbridge High School
Grades
9-12**
14712 Woodbridge Road
Greenwood, DE 19950
302-232-3333

STUDENT'S NAME: _____ ID#: _____

Date of Birth: _____ GRADE (last attended) _____

This form is intended to address requirements of the McKinney-Vento Act, Title X, Part C of the No Child Left Behind Act. The question below is to assist in determining if the student meets the eligibility criteria for services provided under the McKinney-Vento Act. In the event the child is not staying with his/her parent(s) or guardian(s), use the caregiver's authorization to address guardianship issues.

Section A:

Where does the student stay at night?

- House/mobile home
 In a shelter
 In a motel/hotel
 In a car
 At a campsite
 Apartment
 Other location not appropriate for people (e.g. abandoned building)
 Temporarily with more than one family in a house, mobile home, or apartment (because the family doesn't have a place of their own)
 Temporarily with more than one family in a house, mobile home, or apartment (because the family does not have a place of their own)
(If checked, complete Section C) – *See back of paper*
 Other _____

Section B:

I, (name) _____ declare as follows:

1. I am the parent/legal guardian of (student) _____
Who is of school age and is seeking admission to the Woodbridge School District.
2. Since (date) _____ our family has not had a permanent home.

I declare under penalty of perjury under the laws of this state that the information provided here is true and correct and of my own personal knowledge and that, if called upon to testify, I would be competent to do so.

Signature: _____ Date: _____

Section C: (complete only if instructed to do so from page 1)

I am living with: _____

Address: _____

Phone: _____ E-mail Address: _____

Documentation (such as lease agreement, mortgage document, property tax receipt, current month's electric, phone or gas bill with 911 address) showing person you are living with resides in the Woodbridge School District must be provided.

I understand that a representative from Woodbridge School District may verify I am residing at the above address by physically going to the location.

I will notify the school immediately if our present address changes.

By signing this Proof of Residency Affidavit, we understand if we are making false statements we are subject to all applicable penalties.

(Signature of Parent/Guardian)

(Date)

(Signature of Person Residing with)

(Date)