

PLUMAS LAKE SCHOOL DISTRICT

AFFIDAVIT OF RESIDENCY

As parent/legal guardian of:

Student Name

Grade

Date of Birth

I hereby declare under penalty of perjury that I reside with my son/daughter in the Plumas Lake School District at:

Street Address

City

Zip code

(____) _____
Telephone number

**FALSIFYING THE ABOVE INFORMATION MAY RESULT IN IMMEDIATE
DISENROLLMENT OF THE STUDENT FROM THIS SCHOOL.**

I am aware of and fully understand the above statement.

Parent/Guardian Signature

Date



School Use Only
Must be submitted every school year

Utility receipt:

Mortgage Statement:

Government Document:

ADDRESS VERIFIED BY: _____
Signature

Date