

| THE WOOD IN THE PARTY OF THE PA | A SULTANA |
|--|-----------|
| Est.   | 1915      |

| Campus:                    |   |
|----------------------------|---|
| School Year:               |   |
| Administrator's Signature: |   |
|                            | - |

## YSLETA INDEPENDENT SCHOOL DISTRICT ALTERNATE PROOF OF RESIDENCY

|                    | I,parent/guardian of minor  | child(ren)   |                                       |              |  |  |
|--------------------|---|--|---------------------------------------|--------------|--|--|
|                    | ,   | affirm that we, the parent   | guardian and child(ren), reside ful   | ll-time with |  |  |
|                    | at  |  |                                       |              |  |  |
| ian                | Name of Owner of Residence  | Address  | City/State/Zip                        |              |  |  |
| Parent/Guardian    | in the attendance area.  Name of School   |  |                                       |              |  |  |
| Parent             | I understand that if there is a change in residency, it is my responsibili  | ry to notify a campus adm  | ninistrator immediately.              |              |  |  |
|                    | Signature of Parent/Guardian  |  | Date                                  |              |  |  |
| **                 | -<br>************************************   | *******  | *********                             | *****        |  |  |
| e e                | I, resident of Owner of Residence   | ;<br>  |                                       |              |  |  |
| lenc               | Owner of Residence  | Address  | City/State/Zip                        |              |  |  |
| Resid              | affirm that the family named above resides with me full-time at my current address. I understand that it is my responsibility to provide proof                  |  |                                       |              |  |  |
| Owner of Residence | of residence as required by Ysleta ISD Local Policy FD-R.   |  |                                       |              |  |  |
| 0                  | Signature of Resident   |  | Date                                  |              |  |  |
| **                 |   | *****  | *********                             | *****        |  |  |
|                    | Any investigation which documents that a family has not been in the r   |  |                                       |              |  |  |
|                    | the attendance area will result in the student being immediately dropped  | ed from  |                                       |              |  |  |
|                    |   |  | Name of School                        |              |  |  |
|                    | Consequently, this student will not be allowed to enroll in any Ysleta  | nsequently, this student will not be allowed to enroll in any Ysleta ISD schools under these provisions. |                                       |              |  |  |
| u,                 | I understand that the above information will be verified. We also under   | erstand that a person com  | mits an offense if he/she makes, pr   | resents or   |  |  |
| Information        | uses any record, document or device with knowledge of its falsity and   | with the intent that it be t   | aken as a genuine record. This typ    | pe offense   |  |  |
|                    | is a Class A Misdemeanor unless the actor's intent is to defraud, in wh   | ich event the offense is a   | felony of the third degree.           |              |  |  |
| General            | (PENAL CODE, Chapter 37).   |  |                                       |              |  |  |
| Ge                 | In addition to the penalty provided by <u>Section 37.10 (Penal Code)</u> , a p Signature of Parent/Guardian  1. The maximum tuition the district may charge, or | erson who knowingly fals   | ifies records is subject to the great | ter of:      |  |  |
|                    | 2. The amount the district has budgeted for each student, (Texas  | Education Code, Section  | 25.001)                               |              |  |  |
|                    | ****************  | *******  | *********                             | *****        |  |  |
|                    | Subscribed and sworn to me this day   | of   | , 20                                  |              |  |  |
| Notary             | Notary Public In and for El Paso, El Paso County, Texas My commission expires   |  |                                       |              |  |  |