

# FAMILY PARTNERSHIP CORRESPONDENCE SCHOOL

4400 Business Park Blvd. Suite B-22, Anchorage, AK 99503

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## Residency Verification Affidavit

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

The Anchorage School District requires each student's parent or guardian to provide verification of residency. The ASD has stated that the following is considered to be proof of residency:

- a current utility bill with both service and mailing address
- lease agreement
- purchase agreement

If, however, the student and their parent/guardian live in the home of another person, the owner/lessee of the residence must submit one of the above documents and complete and sign the statement below.

I am legally permitted to have the following people reside with me in my home:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

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I, hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, that  
\_\_\_\_\_ appeared before me, a notary public of the Judicial Municipality of Anchorage in the State of Alaska and made an oath/affirmation that the foregoing statements are true and correct.

\_\_\_\_\_  
Signature of Legal Owner/Lessee of property

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Phone number

Witness my hand and official seal:

\_\_\_\_\_  
Notary's signature

\_\_\_\_\_  
Notary's printed name

\_\_\_\_\_  
Date commission expires