

SANTA FE INDEPENDENT SCHOOL DISTRICT

Non-Resident Student/Parent

District Resident Questionnaire



Please complete this form if student(s) and parent(s) are living with another family, and do not qualify for the McKinney-Vento Assistance Program. This form must be notarized and district resident must provide proof of residency. Free notary services are available at the SFISD – Administration Building.

This is to advise the district that the following student(s) reside at:

Street Address	City /State	Zip Code	Phone: Cell or Home	
Full Legal Name (Student)		Age	Date of Birth	Grade
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Full Legal Name (Student)		Age	Date of Birth	Grade

We understand Texas Education Code 25.002 (h) and (i) which states: In addition to the penalty provided by section, 37.10, Penal Code, a person who knowingly falsifies information on a form required for enrollment for a student in a school district is liable for the greater of the maximum tuition fee or the amount the district has budgeted for each student as maintenance and operating expenses if the student is not eligible for enrollment in the district but is enrolled on the basis of the false information.

DISTRICT RESIDENT NAME	SIGNATURE	DATE
PARENT/GUARDIAN NAME	SIGNATURE	DATE

Purpose for residence at this address: _____

APPROVED:

Superintendent/Designee

Date _____

SUBSCRIBED AND SWORN TO BEFORE ME, THIS _____ DAY OF _____ A.D., 20____

NOTARY PUBLIC IN AND FOR

COUNTY

(seal)