

PARENT/GUARDIAN STATEMENT OF RESIDENCE

CELINA INDEPENDENT SCHOOL DISTRICT

Campus: _____

Full Name of Parent or Guardian: _____

Name and Age of Student(s) 1. _____

Attending this 2. _____

Campus: 3. _____

**Address of residence in Celina ISD: _____
(Street Address)

(City) (Zip)

Name of owner of residence: _____

Name of renter (occupant) of residence: _____

Principal/or Designee's Approval _____ Date _____

I hereby state that I do actually reside full-time at the residence stated above. I acknowledge that supplying false information or false records for identification is a criminal offense under Penal Code 37.10. By giving false information, I acknowledge that I may become liable for the greater of the maximum tuition fees the district may charge under Section 25.038 of the Texas Education Code, or the amount the district has budgeted for each student as maintenance and operating expenses, as well as all legal expenses for Celina ISD to collect these amounts in accordance with Texas Education Code 25.001(h). By my signature I affirm that all statements contained herein are within my personal knowledge, true and correct.

(Signature of Parent/Guardian) Date

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As owner, or as renter (occupant) of the above named residence, I do hereby state that the above named family is either residing with me on a full-time basis, or are renting from me. I realize that supplying false information or false records for identification is a criminal offense under Penal Code 37.10 (Texas Education Code 21.0313.)

_____ Most current Identification presented

(Signature of Owner/Occupant of Above Named Residence)

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

_____ Date Commission Expires NOTARY PUBLIC STATE OF TEXAS

****Must attach current water, gas, or electricity bill to this form as an indicator of residence. Bill must reflect physical (service) address of home.**