

Date	:	School:		Grade:	
			klin Public Schools idency Statement		
Check	c One:	☐ New to Franklin Public Schools	☐ Changing address only w	rithin district	
I/we,	the par	ent(s), legal guardian(s) or responsib	le adult of		
hereb	y certif	y as follows:	(Print) DOB:	student's full name)	
	•	•	(Studer	nt's date of birth)	
t T	o Mass Γown of	sh to enroll the above named student achusetts law and Franklin Public Sc f Franklin may attend the Franklin Po f Franklin may not attend the Frankli	chool Committee Policy, sublic Schools and student	students who actually reside in the	
		eby certify that effective ag address in Franklin, Massachusett		, I/we began residing at the	
Ī	Printed Name(s) of Parent(s)/Guardian(s)/ Responsible Adult(s)				
-	No.	Street	apt/Unit No.	_ Franklin, MA 02038	
I	Home T	elephone:	email:		
(Cell Pho	one:	Work Phone:		
3. I	Interstat	e Compact on Educational Opportun	nity for Military Children		
[] [r [☐ Full Nationa☐ Men retired f☐ Men	heck the appropriate box if you volutime Duty members in the uniformed I Guard and Reserve on active duty on the bers or Veterans of the uniformed so for a period of one year after medical or a period on one year after death	d service of the United Sta orders pursuant to 10 U.S. ervices who are severely in discharge or retirement.	ates, including members of the C. Sections 1209 and 1211. injured and medically discharged Or	
S		knowledge that <i>I am/we</i> are required in writing, of any change in said students			
5.	<i>I/we</i> un	derstand that this Residency Stateme	nt will be relied upon by	the Franklin Public Schools for the	

purpose of determining the above student's eligibility to attend the Franklin Public Schools on the basis of residency. If said student is enrolled in the Franklin Public Schools based upon the information provided and it is subsequently determined that the student does not actually reside in Franklin, *I/we* understand that the student's enrollment in the Franklin Public Schools will be promptly terminated and *I/we* will be jointly and severally liable to the Franklin Public Schools for the student's tuition for the full academic year(s).

- 6. *I/we* further certify that *I am/we* are the parent(s), legal guardian(s) or caregiver of the above student. (If signing as a "Caregiver", you will be required to complete the notarized Caregiver Affidavit, pursuant to M.G.L. C-201F 1-6, provided by the Franklin Public Schools.)
- 7. *I/we* understand that all applicants must reside in the Town of Franklin (Massachusetts General Laws, Chapter 76, sec 5 every person shall have a right to attend the public schools of the town where he/she actually resides, subject to the following section. No School Committee is required to enroll a person who does not actually reside in the town unless said enrollment is authorized by law or by the School Committee. Any person who violates or assists in the violation of this provision may be required to remit full restitution to the town of the improperly-attended public schools. No person shall be excluded from or discriminated against in admission to a public school of any town, or in obtaining the advantages, privileges and courses of study of such public school on account of race, color, creed, religion, ancestry, national origin, sex, gender identity or expression, sexual orientation, marital status, genetic information, disability, pregnancy or a related condition, veteran status, age, or homelessness.

Amended by st.1971, c.622, c.1; st.1973, c.925, s.9A, st.1993, c.282; st.2004, c.352, s.33)

8. I/We understand that student grade placement at the time of enrollment will be consistent with Franklin Public School Entrance Age Policy. Final student grade placement is contingent upon verification of records received from sending school district.

Signed under the pain and penalties of perjury on this	day of	, 20:
Parent/Guardian/ Caregiver		
Parent/Guardian/ Caregiver		

This form and proof of residency must accompany this form with at least one document from each of the following two columns: A, and B.

COLUMN A

Evidence of Residency

- Record of recent mortgage payment and/or property tax bill
- Copy of fully signed lease.
 NOTE: School District reserves the right to contact landlord to verify lease. Members of Household who live with a leaseholder must have the entire family (adults and children) listed on the lease to indicate the landlord's knowledge and agreement.
- Tenants at Will landlord affidavit and recent rental payment
- Section 8 Agreement
- Signed HUD Settlement Statement

COLUMN B

Evidence of Identification

- Valid Driver's License
- Valid MA Photo ID
- Passport
- Other Government issued photo ID

Official Franklin Public Schools stamp:

CROSS REF: JFAB
Reviewed, revised 2/7/12
Reviewed, revised, adopted by School Committee 8/26/2014
Reviewed, no revisions 8/18/16
Reviewed, Revised 1/22/2019
Reviewed; revised 10/20/20