

## SAN ANTONIO INDEPENDENT SCHOOL DISTRICT

## **VERIFICATION OF ADDRESS**

## Please print.

House Number and Street		Apartment #	City/State		Zip	
certify that the following perso	ons reside with me at th	e above given address	3:			
Parent/Guardian:		C				
		First	Middle	Last		
Parent/Guardian:						
		First	Middle	Last		
Child:					Age:	
	First	Middle	Last			
Child:					Age:	
	First	Middle	Last			
Child:					Age:	
	First	Middle	Last			
Child:					Age:	
	First	Middle	Last			
Based on this address, the student(s)	is seeking admission in			S	chool. We understand	that
f the parent(s) and child(ren) move j vill be withdrawn from the school no	from this location out of $t$	his attendance zone, or i	f this information is fo			

*§25.001(h) for the period during which the ineligible student is enrolled for the greater of:* 

(1) The maximum tuition fee the District may charge under Texas Education Code §25.038; or

(2) The amount the District has budgeted for each student as maintenance and operating expenses.

## TO BE COMPLETED IN THE PRESENCE OF A NOTARY:

Printed Name of Resident:	Printed Name of Parent/Guardian:			
Signature:	Signature:			
Date of Signature:	Date of Signature:			
SUBSCRIBED AND SWORN TO BEFORE ME by said [print]	and			
to certify which witness my hand and seal of office.	on this the day of, 20			
My commission expires:	NOTARY PUBLIC, STATE OF TEXAS			
(Notary seal)				
	Signature of Notary Public			

San Antonio Independent School District does not discriminate on the basis of race, religion, color, national origin, gender, or disability in providing education services, activities, and programs, including vocational programs, in accordance with Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Educational Amendments of 1972; Section 504 of the Rehabilitation Act of 1973, as amended.