

## **Douglas County** School District - Student Records

Janece R	ogers
District Re	egistrar

## Verified Proof of Residency Form

School Name:	Date:	
Student Name:	Grade:	
The following information is provided as proof of res	dency of a student as required under C.R.S. § 22-1-102.	
I verify that I am the owner / lessor of the following property:		
Address	City State Zip Code	
Attached is a copy of my proof of ownership or occupancy of this residence: (please check one)		
<ul><li>□ Warranty Dee</li><li>□ County Tax or</li><li>□ Lease Agreen</li><li>□ Purchase Agreen</li></ul>	Assessment Notice nent	
I also verify that the following individuals will be resid// to/:	ling at my residence described above from	
Name of Parent/Guardian of Student		
Name of Student		
The above information is true and correct to the best of my knowledge.		
Printed Name of Home Owner/ Lessor	Signature of Home Owner/ Lessor	
	Date Signed	
STATE OF COLORADO )		
) ss: COUNTY OF)		
Subscribed and sworn to before me this day	of, 20, by	
Witness my hand and official seal.		
My commission expires:		
[SEAL]	Notary Public	