KINGDOM EAST
SCHOOL DISTRICT

Kingdom East School District
PO Box 129 Lyndon Center, VT 05850
Harvey Academic Center-VTSU
308 Lower Campus Drive, Lyndonville, VT, 05851
Phone: 802-626-6100 **Fax:** 802-626-3423 **Email:** info@kingdomeast.org
Burke Concord Lunenburg Lyndon Miller's Run Newark Sutton

AFFIDAVIT OF (MULTI-FAMILY) RESIDENCE

I UNDERSTAND THAT THE FOLLOWING INFORMATION WILL BE FULLY INVESTIGATED BY THE SCHOOL DISTRICT. (Parent/Guardian, please initial that you have read this statement) ☐

I, _____ (Parent/Legal Guardian's Name), am residing at: _____ (Address)

_____ (City/State/Zip) with _____ (Homeowner Name)

_____ (Parent/Legal Guardian's Name)

in the Kingdom East School District. I have been residing there since _____

I have no other residence.

The child(ren) for whom I am applying for admission is/are as follows:

Child/Children's Legal Name:	**Grade:**	**School:**

(OVER)

I have provided accurate and truthful information to the best of my knowledge, information and belief. I have not knowingly withheld, concealed, or misrepresented any information that would have a material bearing upon the eligibility of the above child(ren) to attend a Kingdom East School District school.

Finally, I acknowledge that, if investigation reveals that I did not provide true information, the above child(ren) will be withdrawn from the Kingdom East School District, and I may be obligated to pay any tuition monies due.

I am at least eighteen (18) years of age and I state that all statements made herein are made under oath and are true and correct based upon my personal knowledge and belief.

* Homeowner to provide a copy of their deed or rental agreement along with this signed affidavit.

(Signature of Parent/Legal Guardian)

I, _____ do own the property at _____

(Property Owner)

_____

(Physical Address)

_____

(Signature of Property Owner)

State of Vermont County of Caledonia

On the _____ day of _____ , 20 _____, appeared _____

_____

Did say that he/she has read the foregoing and states that it is true and correct to his/her best information and belief.

_____

Notary Public _____

_____

(My Commission Expires)

Affix Seal _____