



District Residency Verification Information

District: COLUMBIA (H.W. Porter School)

Contact Name: Brenda Morey

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Phone: 860-228-8590

Street Address: 3 Schoolhouse Rd., Columbia, CT 06237

Hours of operation: 8-4 (summer hours are intermittent)

Directions and Parking Information:

H.W. Porter School is located off of Route 66. Enter into the main parking lot from Schoolhouse Rd. The main entrance is open during the regular school year. Access through the Superintendent's entrance is an option during the summer but please call in advance to be sure someone is available.

Documents required by this district to present in person to prove residency:

2 documents indicating the current address where the student resides
One document should be a mortgage statement, deed, purchase commitment letter, Lease/Rental Agreement
The other document can be a utility bill, phone bill, real estate tax bill, drivers licence

Does this district have its own residency verification paperwork that needs to be completed?

YES NO

Does the LEARN residency verification form need to be updated every school year?

YES NO

Any additional information that would help families prove residency in this district?

copy of the student's birth certificate

COLUMBIA, CT MAGNET SCHOOL REGISTRATION/RESIDENCY

Child's Legal Name: _____
Last Name First Name Middle Name

Resident Address _____

Mailing Address _____

Home Phone Number _____ Male Female Date of Birth _____

Current Age _____ Grade Entering _____ Place of Birth _____ State _____

U.S. Citizen? Yes No

School Last Attended: _____
City _____ State _____ Zip _____

Does your child have a current IEP or 504 Plan? IEP 504 Plan

NEEDED FOR ENROLLMENT OFFICE USE ONLY

Two documents with address

Superintendent's approval

Date

Race/Ethnicity (Federal Mandate)

Is your child Hispanic/Latino? Yes No (Check only one)

What is your child's race? (Check one or more, even if you answered "Yes" to the Hispanic/Latino question)

American Indian or Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White

Child Lives With: Both Parents Mother Father Stepmother Stepfather Guardian

MOTHER:

_____ Last Name First Name Maiden Name
Address (if different) _____ Email Address: _____
Home Phone: _____ Work Phone: _____ Cell Number: _____
Employer: _____ Occupation: _____

FATHER:

_____ Last Name First Name
Address (if different) _____ Email Address: _____
Home Phone: _____ Work Phone: _____ Cell Number: _____
Employer: _____ Occupation: _____

STEPPARENT/GUARDIAN:

_____ Last Name First Name
Address (if different): _____ Email Address: _____
Home Phone: _____ Work Phone: _____ Cell Number: _____
Employer: _____ Occupation: _____

DIVORCED:

Please Provide Supporting Documentation from Court

Name of parent who has custody of the child: _____

Assignment of custody: Date: _____ Town: _____ State: _____

Other Children in Household:

Name	Birth Date	School Attending
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

STUDENT LIVING SEPARATELY FROM PARENT/GUARDIAN - Living Separately form needs to be filled out and attached.

PARENT/GUARDIAN & STUDENT LIVING TOGETHER AT THE HOME OF A DISTRICT RESIDENT - Living Together at Home of District Resident form needs to be filled out and attached.

— **FILL OUT AND SIGN PAGE 2 ON BACK** —

COLUMBIA, CT MAGNETSCHOOL REGISTRATION/RESIDENCY FORM (PAGE 2)

- ◆ What language did your child learn to speak first? _____
- ◆ Predominant language spoken at home? _____
- ◆ Predominant language spoken by student at home? _____

Magnet School Request

My child, _____, requests to attend _____
as a grade _____ student during the 20____ - 20____ school year.

In signing this document, I understand and acknowledge that I am representing that my child is entitled to free school accommodations from the Town of Columbia by virtue of their having a legal residence at the above-named address. I understand that if the information provided in connection with this questionnaire is determined to be false or misleading, resulting in the child/children named above to not be legally entitled to attendance in the Columbia Public Schools, the school district may take legal action to recoup valid tuition charges and legal fees. I understand that if it is determined that I have defrauded the Columbia Public Schools, I may also be subjected to the pains and penalties of perjury and false statement and such other remedies as may be available under law.

Signature of Parent/Guardian

Date

PROOF OF RESIDENCY
(Columbia Resident)

I, _____, reside at
Name of Resident

Columbia Address

and _____ is residing with me. The residence of
Student's Name

_____ is intended to be permanent, is provided
Student's Name

without pay, and is not for the sole purpose of obtaining school accommodations.

Residents Signature

Date

Signed and sworn before me this ____ day of _____, _____.

Signature

Date

STATE OF CONNECTICUT)
) SS
COUNTY OF)

Personally appeared, _____, and made oath to the truth of the foregoing statement.

Notary Public

My commission expires _____

FOR OFFICE USE ONLY:

In order for student registration to be complete, a copy of two documents showing the street address where the student resides **must be** submitted with this form.

- | | | |
|---|--|---|
| <input type="checkbox"/> Deed or Mortgage Statement | <input type="checkbox"/> Phone Bill (landline) | <input type="checkbox"/> Driver's License |
| <input type="checkbox"/> Lease/Rental Agreement | <input type="checkbox"/> Utility Bill (electricity, cable) | <input type="checkbox"/> Real Estate Tax Bill |