



## District Residency Verification Information

District: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

\_\_\_\_\_

Hours of operation: \_\_\_\_\_

### Directions and Parking Information:

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

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

YES  NO

(If yes, please send as an email attachment.)

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?

Please return responses and any additional paperwork to [wjsonstrom@learn.k12.ct.us](mailto:wjsonstrom@learn.k12.ct.us)