

WEST BLOOMFIELD SCHOOL DISTRICT VIGOROUSLY INVESTIGATES AND PROSECUTES ANY AND ALL CASES OF RESIDENCY FRAUD SCHOOL YEAR 2021-2022

I/we acknowledge that I/we have read this affidavit, including the above statement, and are submitting it in support of a request to enroll in school based on a month to month lease. This affidavit must be renewed at the beginning of each school year.

(PLEAS	E INITIAL: Parent	, Owner)	
Name of	Child(ren) & Grade(s)			
Name of				
Address				
City		, MI Zip Code		
Home Pl	none	Other Phone		
		Phone		
Please p				
1.	By completing this affidavit, the immediately of any change in s	he Parent(s) agrees to notify West said residency.	Bloomfield School District	
2.	I/we (Parent/s) will provide the school district with proof of my residency to include a valid driver's license with current address, current lease/deed, current gas and current electric bills.			
	If you are submitting a driver's license as part of your proof of residency in the West			
	Bloomfield School District, please be advised that if any of the information contained in the license is false, including but not limited to your actual residential address, this is punishable as			
	a felony under Michigan law. N	•	ai address, uns is punisnable as	
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3. West Bloomfield School District may request proof of residence periodically and/or call property owner/apartment manager for verification.

BY SIGNING THIS AFFIDAVIT, I AM SWEARING UNDER THE PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE TO THE BEST OF OUR KNOWLEDGE AND BELIEF. PERJURY IS A FELONY PUNISHABLE BY IMPRISONMENT FOR UP TO 15 YEARS. MCL §750.423

Parent Print Your Name	Property Owner/Management Phone Number
 Date	I confirm that this month to month lease is still in effect.
Signature	Print Your Name
Subscribed and sworn to before me on	 Date
Notary Public,	Signature
County, Michigan	
My Commission expires:	