Student’s Name

**HOMEOWNER’S/LANDLORD’S STATEMENT**

State of New York Monroe County

Date of Birth

1. I (homeowner’s/landlord’s name), own a home or apartment # in a building located at (residence)
2. I have entered into an arrangement with (tenant(s) for the period to during which period the tenant shall have sole use and possession of said residence. The tenant(s) pays rent in the amount of

$ (attach lease, if one exists).

1. Upon information and belief, (tenant(s) do(es) in fact reside at the aforementioned residence on a full-time basis and has no other residence.
2. The following school aged children (under 21 years of age) seeking to enroll in the Rochester City School District, reside at the residence listed in paragraph (1) one:

Name Relationship to Tenant

1. I make these representations in good faith and not as a subterfuge to defeat the Rochester City School District’s right to exclude nonresidents from attendance in the Rochester City Schools.

I understand that the Rochester City School District will rely on the representation herein, and that this statement is being made in order for the child(ren) to be admitted to the Rochester City School District as (a) district resident(s). I have been informed that the School District may make unannounced home visits for the purpose of residency verification.

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name Phone Number(s) Address Cell Number(s)**