

**ISSAQUAH SCHOOL DISTRICT #411**  
**RESIDENCE VERIFICATION FORM**

Please provide the information requested below so that we may legally enroll your child in the Issaquah School District. The Issaquah School District may **ONLY** enroll students whose Parent(s) or Guardian(s) reside within school district boundaries, unless an Interdistrict Transfer form has been *ACCEPTED* by our district prior to enrollment. This form has been provided to help us verify the location of your residence.

Cases in which residency are in question, school officials can investigate by making a home visit. Residency verification is a parent responsibility and falsification of information provided on this document **will be grounds for immediate cancellation of enrollment.**

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_  
(First Name) (Last Name)

Parent/Guardian Name: \_\_\_\_\_ Home Phone #: \_\_\_\_\_  
(circle one above)

Cell Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Address: \_\_\_\_\_  
Number Street Apt. #  
\_\_\_\_\_  
City State Zip Code

**VERIFICATION OF ABOVE RESIDENCE**

- In order to verify the address listed, we require one of the following be provided upon initial registration or at any time during enrollment when a home address changes.
  - Property Tax Statement (reflecting the appropriate school district)
  - Utility or Phone Bill (must include parent/guardian name, address and be less than 30 days old).
  - Purchase papers from a home or the original copy of your lease agreement. If you are renting or leasing your residence in which all utilities are included in rent, you can provide the rental agreement on PROPERTY MANAGEMENT LETTERHEAD ONLY.

**Please do not sign this form if any statements above are incorrect.**

**“I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I agree to notify the Issaquah School District in writing within five (5) school days following any change of my/our residency.”**

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY-** To be signed by the School Official who received form and verified identification checked above.

School Official: \_\_\_\_\_ Date: \_\_\_\_\_