

HAMBURG AREA SCHOOL DISTRICT VERIFICATION OF IDENTITY AND RESIDENCY

Student Name	DOB	Grade	Building
New Address		Former Address if in HASD	
	<u>-</u> 		
PROOF OF IDENTITY: A copy shall be maintain	ned in the student	t records file.	
Original or certified copy of Birth Certifica Other (please circle): adoption decree, pa specifying student's name, sex, date of b	assport, Certifica		order or similar legal instrument
PROOF OF RESIDENCY			
Under the authority of Sections 1301 and 1302 of more of the following. These documents will be understand, and Custodial Resident. This proof occur.	used to verify the	residency of a Regular	Resident, Multiple Occupancy
Agreement of Property sale/lease Property deed	TV ca		oplication for change of address n/billing statement; current g new address
Statement of home owner's insurance Bills or receipts showing new address Bank statement showing address	Drive Prope		olication for change of address
**Change of address card from the post office cannot be accepted			
The above-checked items have been presented t	o me as accepta	ble proofs of residence.	
Signature of Registrar		Date	
I, the undersigned, the parent/guardian enrolling above-checked items in fulfillment of my obligation a true and correct document and I recognize the	ons to enroll the s	aid child for free school	privileges and attest that each is
That the documentation presented for the purpos verification, and should it be determined that the shall then be liable to reimburse the school distribuling child in the Hamburg Area School Distribuling the purpose.	above are not a ct at the then cu	true representation of f	act, either now or in the future, I
Signature of Parent/Guardian		Date	