

**Affidavit of Residence**

I, \_\_\_\_\_, parent or guardian of  
\_\_\_\_\_, a student applying for enrollment in Glen Rose Public  
Schools, hereby declares that I meet all residency requirements for enrollment in the Glen  
Rose School District. I verify that this address is within the boundaries of the Glen Rose School  
District.

My address is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I verify that I reside at the above-mentioned address for not less than four (4) calendar days  
and nights per week, for a primary purpose other than school attendance in the Glen Rose  
School District. I understand that if any protest or inquiry is made by my home district  
concerning my residency, I must supply sufficient proof of my residency to that district. I  
further understand that providing false information to the school district could result in a  
misdemeanor charge and subject to a fine not to exceed one thousand dollars (\$1,000.00). I  
hereby agree to accept full responsibility for such penalties and repayment of any lost revenue  
to my home district.

DO NOT SIGN UNTIL YOU ARE IN FRONT OF NOTARY

As resident of GRSD, \_\_\_\_\_, I verify that the above statements are  
true.

\_\_\_\_\_  
(Parent/ guardian signature) (Homeowner signature)

\_\_\_\_\_  
(Printed Parent / guardian name) (Printed Homeowner name)

**Acknowledgement**

Subscribed and sworn to me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public