

Board of Education
Queen Anne's County
Centreville, Maryland 21617

VERIFICATION OF RESIDENCE IN QUEEN ANNE'S COUNTY

Requested School: _____

Parent(s)/Legal Guardian(s): _____

Former Address: _____

Name(s)/Age/Grade of Child(ren): _____

I/WE do hereby declare and affirm under penalties of perjury that the following information is true and correct to the best of my/our knowledge, information, and belief.

I/WE, the undersigned, do hereby attest that the following person(s) are residing at: _____

Name(s) of Parent(s)/Legal Guardian(s): _____

Name(s) of Child(ren): _____

It is understood that the information provided by the undersigned is accurate and that any attempt to falsify the above information shall result in the immediate withdrawal of the student(s) from Queen Anne's County Public Schools. If a child fraudulently attends a public school in a county where the child is not domiciled with the parent or guardian, the parent or guardian shall be subject to a penalty payable to the county for the pro-rated share of tuition for the time the child fraudulently attends a public school in the county (House Bill 364, effective 07/01/97).

Signature of Homeowner/QAC Resident: _____

Signature(s) of Parent(s)/Legal Guardian(s): _____

Homeowner/Landowner's proof of residency: (copy attached) Verified by: _____

Sworn and subscribed to me on this _____ day of _____, _____

Notary Public
County of _____ My Commission Expires: _____

SEAL