



Travis Unified School District

2751 De Ronde Drive
Fairfield, CA 94533

Shared Residency Affidavit

Student Services
(707) 437-4604 x 1114 Fax: (707) 437-8254
syoung@travisusd.org

____ - ____ School Year ____ New ____ Renewal ____ Returning Date: _____

The Travis Unified School District requires a Shared Residency Affidavit to be completed when a student and their parent / guardian BOTH live full time in the home of another individual who resides within the attendance boundaries of the District. The proper completion of this affidavit may allow the student living in this residency to attend school within the District. (Cal Ed. Code 48204)

The **PARENT(S)/GUARDIAN(S)** must provide the two (2) forms of residency, that includes the name of Parent(s)/Guardian(s) and the shared address:

- Copy of government-issued photo ID (California Driver's License or California ID Card with shared address) or DMV Receipt showing the change of address process has been started.
- 1 - Supplementary form of documentation such as: Payroll Stub, Ca. Vehicle Registration, Bank Statement, or U.S. Mail from a Government Agency.

The **RESIDENT** must provide two (2) forms of residency, showing ownership or rental verification:

- Current PG&E, Water, or Garbage bill
- Copy of current Solano County Property Tax bill or Mortgage Statement
- Current lease/rental agreement with proof of recent payment (if applicable)

Shared Address: _____ City: _____ Zip Code: _____

This Living arrangement is Temporary: ____ - Duration? _____ or Permanent: ____

Student: _____ Birthdate: _____ Grade: _____ School: _____

Student: _____ Birthdate: _____ Grade: _____ School: _____

Student: _____ Birthdate: _____ Grade: _____ School: _____

Student: _____ Birthdate: _____ Grade: _____ School: _____

Parent Statement: We / I, the parent, solemnly swear and affirm, the address listed above is my only residence, that we reside at the address listed above. We/I also understand that falsification of any information or documents required for residency verification or the use of the address of another person without actually residing there may result in immediate revocation of student enrollment in the District. I agree to notify Travis Unified Schools if there is any change in the status of my residence. I understand that home visitations and / or residency verification is part of the process when residency is established by a Shared Residency Affidavit. I attest that this request to enroll in Travis Unified School District is not primarily related to attendance at a particular school in Solano County, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.
(Board Policy 5111.1.) (Penal Code 118,126)

Parent / Guardian Signature: _____

Email: _____ Phone: _____

Resident Statement: We / I, the parent, solemnly swear and affirm, the address listed above is my only residence, that we reside at the address listed above. We/I also understand that falsification of any information or documents required for residency verification or the use of the address of another person without actually residing there may result in immediate revocation of student enrollment in the District. I agree to notify Travis Unified Schools if there is any change in the status of my residence. I understand that home visitations and / or residency verification is part of the process when residency is established by a Shared Residency Affidavit. I attest that this request to enroll in Travis Unified School District is not primarily related to attendance at a particular school in Solano County, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.
(Board Policy 5111.1.) (Penal Code 118,126)

Resident Signature: _____ Phone: _____

(OFFICE USE ONLY)

School(s): _____ Cont: ____ New: ____ Returning: ____ Grade(s): _____

Approved: _____ Authorized Signature: _____ Date: _____

SHARED RESIDENCY AFFIDAVIT
(TO BE COMPLETED BY A NOTARY)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed this document and not the truthfulness, accuracy, or validity of this document Shared Residency Affidavit.

State of California, County of _____

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20 _____

by,

(1) _____ (parent)

(2) _____ (resident)

The above named proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to be within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument, the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Notary Signature: _____

Place Notary Seal Above

Though this section is optional, completing this information can defer alteration of the document or fraudulent re-attachment of this form to an unintended document.

Description of Attached Document

Title of Type of Document: _____ Document Date: _____

Number of Pages: _____

Date: _____

Student Name: _____ Grade: _____ School: _____

Shared Residency Affidavit: Required Documentation

- Complete the Shared Residency Affidavit form including having page 2 notarized
- Provide the required documents (see below)
- All documents MUST show shared address.

Parent/Guardian: _____

Must provide two (2) forms of residency evidence that include the following:

Name of Parent/Guardian on the following documents

- **One** copy of parent / guardian government-issued photo ID (California Driver's License or California ID Card) showing shared address or DMV Receipt, showing the process has been started.
- **One** of the following Supplementary forms of documentation with shared address listed:
 - ☐ Payroll stubs
 - ☐ California Vehicle Registration
 - ☐ Bank Statement
 - ☐ U.S. mail from a Government agency

Resident (person responsible for the address listed): _____

Must provide two (2) forms of residency evidence of ownership/rental verification:

Name of Resident & (shared) address on the following documents:

- **One** current utility bill from one of the following:
 - ☐ PG&E
 - ☐ Water
 - ☐ Garbage
- **One** of the following:
 - ☐ Current Solano County Property Tax Bill or Current Mortgage Statement
 - ☐ Current lease/rental agreement with proof of recent payment (*agreement between the resident & rental property or property owner*)

Note: The Shared Residency Affidavit application is part of the residence verification needed in-order-to enroll a child in school. The application **will not be** reviewed or processed until all required documents have been submitted and the Shared Residency Affidavit is considered complete.

Student Services Department Use

- ☐ All appropriate documents above have been submitted and are attached to the application
- ☐ Notarized
- ☐ Verified Residence Address within Travis USD attendance boundaries
- ☐ Verified Student Grade
- ☐ Existing Student Yes / No