



# WRENTHAM PUBLIC SCHOOLS Residency Affidavit

*This form is not required for students who are considered homeless under the McKinney-Vento Act.*

I/We the parent(s), legal guardian(s) or responsible adult of \_\_\_\_\_  
(Print student's full name)

Hereby certify as follows:

1. I/We wish to enroll/re-enroll the above named student in the Wrentham Public Schools for the **current** school year. I/We understand that pursuant to Massachusetts General Law (Chapter 76, Section 5), students who actually reside in the Town of Wrentham may attend the Wrentham Public Schools (WPS) and students who do not actually reside in the Town of Wrentham may not attend the Wrentham Public Schools.

2. I/We hereby certify that effective \_\_\_\_\_, 20\_\_\_\_, the above named student is/will be residing at the following address in Wrentham, Massachusetts, with:

\_\_\_\_\_  
Printed Name(s) of Parent(s)/Guardian(s)/Responsible Adult(s)

\_\_\_\_\_  
Wrentham, MA 02093

No. Street Apt/Unit No.

Phone:(C)\_\_\_\_\_ (H)\_\_\_\_\_ (W)\_\_\_\_\_

3. I/We acknowledge that I am/we are required to notify the Wrentham Public Schools of the above student, in writing, of any change in said student's address within five (5) business days of such change of address and **to provide new proof of residency** to WPS.

4. I/We understand that this Residency Affidavit will be relied upon by the Wrentham Public Schools for the purpose of determining the above student's eligibility to attend the Wrentham Public Schools on the basis of residency. If said student is enrolled in the Wrentham Public Schools based upon the information provided and it is subsequently determined that the student does not actually reside in Wrentham, I/we understand that the student's enrollment in the Wrentham Public Schools will be promptly terminated and I/we will be jointly liable to the Wrentham Public Schools for the student's tuition for the full academic year(s).

5. I/We further certify that I am/we are the parent(s), legal guardian(s), or responsible adult of the above student.

6. I/We understand that all applicants must reside in the Town of Wrentham in accordance with M.G.L. Chapter 76, Section 5.

Signed under the pain and penalties of perjury on this

\_\_\_\_\_  
Date

(Temporarily not Required)

\_\_\_\_\_  
Parent/Guardian 1

\_\_\_\_\_  
Parent/Guardian 2

\_\_\_\_\_  
Witness (School Staff)

A typed signature will be accepted for online registration only.