

SAN DIEGO UNIFIED SCHOOL DISTRICT

Date: September 18, 2015

To: Principals, Vice Principals, Counselors and Enrollment Staff

Subject: VERIFICATION OF RESIDENCE FOR ENROLLMENT PURPOSES

Department and/or Persons Concerned: Principals, Vice Principals, Registrars, School Site Officer Managers, and Attendance/Enrollment Clerks

Due Date: Enrollment Periods

Reference: Education Code Section 48200; Title 5, California Code of Regulations Section 432; District Administrative Procedure Nos. 6120 and 6123, AB490, ESEA

Action Requested: Requirement for Proof of Residence

Brief Explanation:

The California Department of Education requires that schools annually verify the residence of their students. A parent or legal guardian may establish residency with a wide range of documents that provide reasonable evidence that the student meets residency requirements for the school. If residency has been previously established with documentation, it is not necessary to obtain again, as long as the parent signature on the enrollment card reconfirms the same resident address.

Copies of the following documents are acceptable to establish residence within a school's attendance area:

1. A recent utility bill (SDG&E, phone, water, cable)
2. A rental agreement or rent payment receipts
3. Property tax payment receipts
4. Mortgage documents
5. Military housing orders

Copies of the provided documentation should be made for the student's records. If none of these documents are available, a declaration (statement under oath) by the parent or legal guardian indicating an address within the school's attendance area is acceptable. (See Attachment 1 for a copy of the declaration.) Declarations made under oath do not need to be notarized. Please do not ask families to request letters from utility providers. It is acceptable for new families to sign the declaration and bring in a utility bill in 30-60 days. **Schools are requested to discard all site generated affidavits of residency or occupancy and cease the practice of requiring notarization of forms.**

If the student is not living with the parent or guardian, the adult with whom the student is living may complete a "Caregiver's Authorization Affidavit" form and present proof of residence. (See

Attachment 2 for a copy of the Caregiver's Authorization Affidavit.) The purpose of this form is to verify a student's residence when a child is living with relatives/guardians or other care giving adult. It is not to be used to circumvent the District's Choice process, [Magnet, Voluntary Enrollment Exchange Program (VEEP), or Program Improvement School Choice (PISC) or Open Enrollment.] Completion and the signing of the affidavit are sufficient to authorize enrollment and school related medical care.

The legal residence of a student is where the parent/guardian or caregiver resides unless the student is a homeless unaccompanied youth and is not in the physical custody of a parent or legal guardian. A youth in this situation must be enrolled immediately and the school should contact the Office of Children and Youth In Transition (CYT) at 619-725-7652 for assistance. Federal law requires that homeless students and state law requires that foster students be allowed to enroll in school, attend classes and participate fully in school activities even if they do not have all of the required school records, medical records and **proof of residency**. Personnel at the school of enrollment must work with the parents or guardians to obtain all required documents. It is the intent of this legislation to keep homeless students in their *school of origin*, that is, the school they attended when permanently housed or in which they were last enrolled. Homeless students may also choose to enroll at the neighborhood school in which their temporary address resides. Any questions concerning homeless, unaccompanied youth or foster students' enrollment should be directed to the Office for Children and Youth in Transition at (619) 725-7652.

Please use the correct residence status for homelessness when enrolling students in PowerSchool. It is important to accurately reflect the most appropriate living arrangement in the student database in order for students to receive immediate eligibility for free breakfast/lunch and/or other available services.

Questions concerning this circular should be directed to the Neighborhood Schools and Enrollment Options Office at (619) 725-7153.

Marceline Marques
Director
Neighborhood Schools and Enrollment Options Office

APPROVED:



Midori Wong
Director, Office of Special Projects

MM:imt

Attachments (2)

Distribution: Lists B, D, E, and F

San Diego Unified School District Declaration of Residency

I, _____, declare that I reside at
(Print Name)

_____, _____, CA _____
Street City Zip Code

I declare that my Child(ren) live(s) at the address above.

(List all children – Print first and last names)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated _____ SIGNED _____

Warning: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable under the laws of the State of California that the foregoing is true and correct.

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Street City Zip Code

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**Distrito Escolar Unificado de San Diego
Declaración de Domicilio**

Yo, _____, declaro que tengo mi domicilio en
(Nombre con letra de molde)

_____, CA _____
Calle Ciudad Código Postal

Declaro que mi hijo/hija(hijos) viven en el domicilio anterior.

(Escriba el nombre de todos los niños – Escriba su nombre y apellido)

Declaro bajo pena de ley del Estado de California que lo anterior es verdadero y correcto.

Fecha _____ **FIRMA** _____

Advertencia: No firme esta declaración si algo es incorrecto, o podrá ser penalizado bajo las leyes del Estado de California.

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Caregiver's Authorization Affidavit

Use of this affidavit is authorized by Part 1.5 (commencing with Section 6550) of Division 11 of the California Family Code.

Instructions: Completion of items 1-4 and the signing of the affidavit is sufficient to authorize enrollment of a minor in school and authorize school-related medical care. Completion of items 5-8 is additionally required to authorize any other medical care. Print clearly.

The minor named below lives in my home and I am 18 years of age or older.

1. Name of minor: _____
2. Minor's birth date: _____
3. My name (adult giving authorization): _____
4. My home address: _____

5. I am a grandparent, aunt, uncle, or other qualified relative of the minor (see back of this form for a definition of "qualified relative").
6. Check one or both (for example, if one parent was advised and the other cannot be located):
 - I have advised the parent(s) or other person(s) having legal custody of the minor of my intent to authorize medical care and have received no objection.
 - I am unable to contact the parent(s) or other person(s) having legal custody of the minor at this time to notify them of my intended authorization.
7. My date of birth: _____
8. My California driver's license or identification card number: _____

Warning: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable by a fine, imprisonment, or both.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

Signed: _____

Notices:

1. This declaration does not affect the rights of the minor's parents or legal guardian regarding the care, custody, and control of the minor and does not mean that the caregiver has legal custody of the minor.
2. A person who relies on this affidavit has no obligation to make any further inquiry or Investigation.
3. This affidavit is not valid for more than one year after the date on which it is executed.

Additional Information:*To Caregivers:*

1. "Qualified relative," for purposes of item 5, means a spouse, parent, stepparent, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any person denoted by the prefix "grand" or "great," or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.
2. The law may require you, if you are not a relative or currently licensed foster parent, to obtain a foster home license in order to care for a minor. If you have any questions, please contact your local department of social services.
3. If the minor stops living with you, you are required to notify any school, health care provider, or health care service plan to which you have given this affidavit.
4. If you do not have the information requested in item 8 (California driver's license or I.D.), provide another form of identification such as your social security number or Medi-Cal number.

To School Officials:

1. Section 48204 of the Education Code provides that this affidavit constitutes a sufficient basis for determination of residency of the minor, without the requirement of a guardianship or other custody order, unless the school district determines from actual facts that the minor is not living with the caregiver.
2. The school district may require additional reasonable evidence that the caregiver lives at the address provided in item 4.

To Health Care Providers and Health Care Service Plans:

1. No person who acts in good faith reliance upon a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is subject to criminal liability or to civil liability to any person, or is subject to professional disciplinary action, for such reliance if the applicable portions of the form are completed.
2. This affidavit does not confer dependency for health care coverage purposes.