

**ADMISSION OF
RESIDENT STUDENTS**

**STATE OF ARIZONA
AFFIDAVIT OF SHARED RESIDENCE**

Student Name: _____

Parent/Legal Guardian Name: _____

School Name: _____

School District or Charter Holder: _____

Name of Arizona Resident: _____

I, (resident name) _____, swear or affirm that I am a resident of the State of Arizona and that the persons listed below reside with me at my residence, described as follows:

Persons who reside with me: _____

Location of my residence: _____

I submit in support of this attestation a copy of the following document that displays my name and current residence address or physical description of my property:

_____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration

_____ Valid Arizona Address Confidentiality Program (ACP) authorization card

_____ Real estate deed or mortgage documents

_____ Property tax bill

_____ Residential lease or rental agreement

_____ Water, electric, gas, cable, or phone bill

_____ Bank or credit card statement

_____ W-2 wage statement

_____ Payroll stub

_____ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona

_____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)

Acknowledgement

Printed Name of Affiant: _____

Signature of Affiant: _____

State of Arizona

County of Cochise

The foregoing was acknowledged before me this ____ day of _____, 20____,

By _____.

My Commission Expires

Notary Public

**Arizona Department of Education
Arizona Residency Guidelines
REVISED April 24, 2019**