## Colonial Heights Public Schools 512 Boulevard, Colonial Heights, VA 23834 Certification of Legal Residency in Colonial Heights, Virginia Parent/Legal Guardian Dual Family Residency

This form must be completed by the *parent/legal guardian* 

A SEPARATE FORM MUST BE COMPLETED FOR EACH CHILD REGISTERED IN THE COLONIAL HEIGHTS PUBLIC SCHOOL SYSTEM.

Student Name: (please print)	
School:	
Address where student and parent/guardian	reside:
Complete below with name(s) of parent(s) that live with the studen	nt at the above address:
Parent/Guardian Name:	Phone Number:
(please print)	
Parent/Guardian Name:	Phone Number:
	esidency at this address began for parent/student:
Expected date residency at the address will en	nd for parent/student:
Parent/student's previous address:	
please check the appropriate box:  In an emergency or transitional shelte In a motel, hotel, or campground due In a parked car, park, public place, b Doubled up with relatives or friends of  Parent or legal guardian's certification staten I certify that I am the parent or legal guardian of the of I understand that I must give immediate written notic Parents and other guardians need to be aware that Ch arrangements in all residentially-zoned districts. Pare reside, in a home with another, non-related family or	e to loss of housing ous or train station, or abandoned building due to loss of housing  ment: child named above and I reside at the above address in Colonial Heights, Virginia. ce to the school if this residency arrangement changes. napter 286 ("Zoning") of the Colonial Heights City Code restricts living tents and other guardians who are considering residing, or having their children reperson, should review Article III ("District Regulations") of Chapter 286 to ment with a non-related family or person is legal. A violation of Article III is a
•	rmation for school enrollment purposes is a criminal offense. VA Code 22.1-264.1.
Parent/Guardian Signature	Date
Parent/Guardian Signature (If the child resides with both parents, both must sign) ************************************	
STATE OF VIRGINIA, City/County of:	, to-wit:
Subscribed, sworn to, and acknowledged before me,	<del>,</del>
a Notary Public in and for the jurisdiction aforesaid, l	by
on this	day of, 20
My commission expires: Notary signatu	ure