Please return all completed forms to 509 N Main Ave, Huxley, IA 50124



## **Ballard Community Schools**

## **Co-Resident Registration**

This form must be completely filled out and notarized prior to approval. \*\*Attached documents must be included.

<b>Ballard Resident Information</b>	l <u>:</u>	Today's Date:		
Name:				
Address:				
(Number & Street)	(Apt/Lot#)		(Zip Code)	
Home or Cell Phone Number:				
Children Attending Ballard CSD:				
□ Yes				
□ No				
Residence is:				
□ Owned				
□ Rented/Leased				
**Proof of Residency Attached:				
□ Print out fromStory County A	ssessor site			
Current Utility Bill - with Ba	llard address listed (c	urrent is defined as wi	thin the past 30 days)	
Current signed lease agreement	nt			
<b>Ballard Co-Resident Informa</b>	tion:			
Parent/Guardian Name:				
Student Name(s):				
Move-in date:	Expected length of	f Co-Residency	:	
Reason for Co-Residency:				

## **\*\*Proof of Residency for Co-Resident Attached:**

- □ Addendum to Lease or Deed with name added
- □ Current utility bill or any other bill mailed to the above Ballard address
- $\Box$  A pay stub from your current employer showing Ballard address
- □ US Mail forward confirmation
- Other \_\_\_\_\_

By signing this form you are affirming that all information given above is true and correct and that this is the legal residence of the parent/guardian and student(s). Should the district learn that this family is not a legal resident of Ballard Community School District such students will be withdrawn immediately from Ballard Schools. If this should happen I understand that I will be held liable to reimburse the school district of any tuition incurred for the time in attendance as a non-resident student.

(Resident)		(Co-Resident)		
Sworn to before me this	day of		_, 20	
Notary Public:				
(Place Notary Seal or Stamp below)				