

Residency Verification Form

Parent/Guardian Name:	Phone:
Children's Names:	
Current Home Address:	City: Zip Code:
TO BE COMPLETED BY LANDLORD OR PROB	
I AFFIRM THAT FAMILY MEMBERS LISTED ABOVE CUR	RRENTLY RESIDE AT THE ADDRESS LISTED ABOVE.
Landlord/Property Owner Name PRINTED:	Phone:
	Date:/
TO BE COMPLETED BY PARENT/GUARDIAN	
live at the address listed above. I am aware that if I kn	se documents to verify my residency and that my child(ren) and I nowingly provide false, misleading, or incomplete information it orted to the Department of Law Enforcement Division of Public
 Valid Florida driver license with my name and Florida Identification card with my name and of Recent utility bill in my name with current add Recent pay-stub with my name and current add Property tax assessment in my name showing Current and valid residential rental agreement Military orders 	current address dress listed ldress listed homestead exemption
Parent/Guardian Name PRINTED:	
•	Date:/
	I MUST BE NOTARIZED*
Pursuant to Section 117.05(13)(a), Florida Statutes, taffirmation:	the following notarial certificate is sufficient for an oath or
STATE OF FLORIDA COUNTY OF	
Sworn to (or affirmed) and subscribed before me by r	means of [_] physical presence or [_] online notarization, this
day of, 20, by parent/guardian s	ignature
Name of Notary Typed, Printed, or Stamped:	
Signature of Notary Public-State of Florida:	
Personally Known OR Produced Identification	
Type of Identification Produced	