BANGOR SCHOOL DEPARTMENT Verification of Residency

This certification form is required as part of the registration process for all students.

Two forms of proof of residency will be required.

Name of Student:	Last Name		First Name		Middle Initial
Date of Birth	Month/Day	/Year ex.0	01/22/2002		
Residence:					
	House #	Street		Apt. #	Zip Code
	□ Ch	eck here if s	student is homeless or	living in a shelter	
I hereby certify that I prescribed by Maine St the address specified a residency changes, I ag	tate Law. I fu above. I under aree to bring i	rther state rstand that I	that I am a legal resid I have the burden of p ediate attention of the	ent of the City of roof regarding res	Bangor and reside at sidency. If this
Parent/Guardian Signat	·ure:			Date:	
Parent/Guardian Signat			official School Use C		
Parent/Guardian Signat Types of residency p	E	Below for O		Only	
	E	Below for O	official School Use C	Only se #	
Types of residency p	E	Below for O	Official School Use Co	Only se #	
Types of residency p	E	Below for O	Official School Use Communication Maine driver's licen Utility receipt dated	Only se # Idated	
Types of residency p	E	Below for O	Maine driver's licen Utility receipt dated Real estate tax bill	Only se # dated	
Types of residency p	E	Below for O	Maine driver's licen Utility receipt dated Real estate tax bill Rental lease dated Excise tax receipt d	Only se # dated dated	