



RESIDENCY VERIFICATION

Orchard Farm R-V School District

I, _____, the property owner/landlord of the residence located at,
(property owner name/landlord)

(Full Property Address)

hereby certify that the following person(s) reside at the address listed above:

_____	_____
_____	_____
_____	_____
_____	_____

I affirm that I reside within the boundaries of the Orchard Farm R-V School District, and that any information or documentation that I have provided as proof of residency is true and correct to the best of my knowledge, information, and belief.

NOTICE: Any person who knowingly submits false information to satisfy the residency requirements shall be subject to a class A misdemeanor charge and may be civilly liable for expenses incurred while the student was enrolled. By signing this form you are certifying the district that the above information is accurate. (167.020, RSMo)

(signature of property owner)

(signature -occupant/parent/guardian)

Date

State of Missouri}
County of _____}

On this ____ day of _____ in the year _____, before me, the undersigned notary public, personally appeared _____, known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Notary Public

My Commission Expires: _____