

Shared Housing Affidavit

This Shared Housing Affidavit must be completed if a student(s) and their parent(s)/ guardian(s) are sharing housing with another individual as a long-term living arrangement within the attendance boundaries of Santa Clara Unified School District (SCUSD) without a lease or rental agreement. After completing this affidavit, the parent(s)/guardian(s) must upload this form along with the required Proof of Residency Documents.

The student and student's parent(s)/guardian(s) must live at the address listed below full time. The parent(s)/guardian(s) must notify SCUSD Enrollment Center or School Site of such change **within 15 calendar days** if there is a change of address.

Street Address: _____ Apt.: _____
City: _____ State: _____ Zip Code: _____

Owner or Lessee Statement

I, (Print Name) _____, the owner or lessee of the residence listed above, declare under penalty of perjury under the laws of the State of California that (Parent/Guardian Printed Name) _____ and

Student Name: _____	Birth Date: _____
Student Name: _____	Birth Date: _____
Student Name: _____	Birth Date: _____
Student Name: _____	Birth Date: _____

all physically reside with me full time at the above-named address. This living arrangement is:

- Temporary — Duration: _____
 Permanent

Signature of Owner or Lessee: _____ **Date:** _____

Parent Statement

I, _____ the parent/guardian of the student(s) listed above, do solemnly swear, affirm, and declare under penalty of perjury under the laws of the State of California, that we reside full time at the address listed above.

Signature of Parent/Guardian: _____ **Date:** _____