



HACKENSACK PUBLIC SCHOOLS

191 Second Street, Hackensack, NJ 07601 • 201-646-8000

www.hackensackschools.org

RESIDENCY VERIFICATION FORM – ONE FOR EACH STUDENT

Please Print

Student's Last Name: _____ First Name: _____ Middle: _____

Address of Residence: _____ Apt# _____

City: _____ State: _____ Zip: _____

Home Phone #: () _____

Mother's/Guardian's: Work Number: _____ Cell Number: _____

Father's/Guardian's: Work Number: _____ Cell Number: _____

List all student's registered:

Name	School	Current Grade

Please contact Linda Fritz, Assistant to the Business Administrator at 201-646-0295, if special circumstances are involved such as: doubled up in a home with another family, living in a shelter or temporary housing, living in a hotel, etc.

The following is a list of **residency requirements** that you are to provide to the District for verification:

MUST PRESENT ONE OF THE FOLLOWING:

- _____ Deed
- _____ Current Property Tax Bill
- _____ Current Lease or 5C form
- _____ Mortgage
- _____ 6-C Affidavit Individual

TWO OF THE FOLLOWING. ALL MUST HAVE YOUR NAME AND ADDRESS and MUST BE CURRENT:

- | | | |
|-------------------------|---------------------------------|----------------------------|
| _____ Gas Bill | _____ Water Bill | _____ Paystub |
| _____ Cable Bill | _____ Cell Phone Bill | _____ Driver's License |
| _____ Electric Bill | _____ Car/Home Insurance Policy | _____ Bank Statement |
| _____ Credit Card Bill | _____ Delivery Receipts | _____ Medical Reports |
| _____ Benefit Statement | _____ Sewer Bill | _____ Government Issued ID |

Signature of Parent or Guardian: _____

Date: _____