



HOMEOWNER'S/LANDLORD'S STATEMENT

One Larkin Center
Yonkers NY, 10701
(914) 376-8050
studentenrollment@yonkerspublicschools.org

I, _____,
(Name)

residing at _____
(Address)

submit this residency statement to the Yonkers Public Schools to personally verify that

(Name(s) of Parent(s)/Guardian(s))

and his/her/their child(ren), _____,
(Name(s) of Child(ren))

reside at _____
(Address)

a residential property of which I am the owner.

1. Please select one of the statements below:

The Parent(s)/Guardian(s) and his/her/their child(ren) shall have **sole use and possession** of the above residence.

I **share use and possession** of the above residence with the Parent(s)/ Guardian(s) and his/her/their child(ren).

2. The Parent(s)/Guardian(s) and his/her/their child(ren) began residing at the above residence on

_____. (date)

3. I have agreed to allow the Parent(s)/Guardian(s) and his/her/their child(ren) to reside at the above residence

until _____. (date) (Please indicate if no end date is established.)

4. Please select and complete one of the below:

I receive rent in an amount of \$_____ per month for the use of the above residence.

I do not collect rent for the use of the above residence.



5. Upon information and belief, the Parent(s)/Guardian(s) do(es) in fact reside at the above residence:

on a full time basis and has/have no other residence.

on a part time basis. Please explain _____

6. Upon information and belief, the above listed children do(es) in fact reside at the above residence:

on a full time basis and has/have no other residence.

on a part time basis. Please explain _____

I understand that this document will be submitted to the Yonkers City School District (the "District") and that the District will rely on representations made herein when making its decision as to whether the above named child(ren) is/are legally entitled to attend school within the District. I further understand that the submission of false information or false statements to the District is a violation of New York Penal Code and is punishable by a fine and/or imprisonment. Additionally, I acknowledge that the District has a right to investigate any claims made herein including, but not limited to, making unannounced home visits for the purpose of verifying that the above named children reside at the address provided.

Please note that the District will keep this document as part of its records.

I hereby make the above representations in good faith and not in an attempt to defraud the District.

Signature _____

Date _____

Print Name _____

Phone Number _____

STATE of New York)
COUNTY of Westchester)

On the _____ day of _____ in the year 20_____, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed on the within instrument and acknowledged to me that he/she executed the same in his/her own capacity and that, by his/her signature on the instrument, the individual, or the person upon behalf of whom the individual acted, executed the instrument.

Notary Public

For Official Use Only

Student Name _____ DOB _____ Student Name _____ DOB _____

Student Name _____ DOB _____ Student Name _____ DOB _____