



LYNNFIELD PUBLIC SCHOOLS
525 Salem Street
Lynnfield, MA 01940

Affidavit of Residency
Form B - Own and reside at property address

I/we, the parent(s), legal guardian(s) or responsible adult of _____,

_____ (Print each student's full name)

hereby certify as follows:

1. I/we wish to enroll the above named student in the Lynnfield Public Schools. I/we understand that pursuant to Massachusetts law and Lynnfield Public School Committee Policy JF, only students who actually reside in the Town of Lynnfield may attend the Lynnfield Public Schools. "Residence" is a place where a person actually lives, and is the place that is the center of his/her domestic, social and civil life. Temporary residence in the Town of Lynnfield solely for the purpose of attending the Lynnfield Public Schools is not considered "residence" for admissions to the Lynnfield Public Schools. I/we understand that students who do not actually reside in the Town of Lynnfield may not attend the Lynnfield Public Schools.
2. I/we hereby certify that effective _____, 20____, the above named student is/will be residing at the following address in Lynnfield, Massachusetts, with:

Printed Name(s) of Parent(s)/Guardian(s)/ Responsible Adult(s)

No. Street Apt/Unit No. Lynnfield, MA Zip Code

Home Phone: _____ Cell Phone: _____ Work Phone: _____

3. I/we acknowledge that I am/we are required to notify the Lynnfield Public Schools or the above student's school, in writing, of any change in said student's address within five (5) calendar days of such change of address.
4. I/we understand that this *Affidavit of Residency Statement* will be relied upon by the Lynnfield Public Schools for the purpose of determining the above student's eligibility to attend the Lynnfield Public Schools on the basis of residency. If said student is enrolled in the Lynnfield Public Schools based upon the information provided and it is subsequently determined that the student does not actually reside in Lynnfield, I/we understand that the student's enrollment in the Lynnfield Public Schools will be promptly terminated and I/we will be jointly and severally liable to the Lynnfield Public Schools for the student's tuition for the full academic year(s).
5. I/we further certify that I am/we are the parent(s), legal guardian(s) or responsible adult of the above student. (If signing as a "Responsible Adult", you will be required to complete the Caregiver Authorization Affidavit provided by the Lynnfield Public Schools.)
6. I/we understand that all applicants must reside in the Town of Lynnfield (Massachusetts General Laws, Chapter 76, sec 5 every person shall have a right to attend the public schools of the town where he/she actually resides, subject to the following section.

No School Committee is required to enroll a person who does not actually reside in the town unless said enrollment is authorized by law or by the School Committee. Any person who violates or assists in the violation of this provision may be required to remit full restitution to the town of the improperly-attended public schools. No person shall be excluded from or discriminated against in admission to a public school of any town, or in obtaining the advantages, privileges and courses of study of such public school on account of race, color, sex, religion, national origin or sexual orientation.

Amended by st.1971, c.622, c.1; st.1973, c.925, s.9A, st.1993, c.282; st.2004, c.352, s.33)

Signed under the pain and penalties of perjury on this _____ day of _____, 20__:

Signature of Parent/Guardian/Responsible Adult:

The above signature must be signed in front of a notary public

Signature of Parent/Guardian/Responsible Adult:

The above signature must be signed in front of a notary public

The information contained in this legal affidavit is subject to verification by a residency investigator

Revised 10-2011

Revised 1-2012

Legal References: MGL c. 76, sec. 5

McKinney – Vento Homeless Assistance Act

Amended: September 7, 2010

Amended: March 8, 2011

Revised: December 13, 2016

Revised: December 1, 2017

Notary Public

County of Essex, Commonwealth of Massachusetts personally appeared and subscribed and sworn before me, this, the

_____ of _____, 20 ____.

Signature of Notary Public

My Commission expires on