



Logan Elm Local School District
 9579 Tarlton Road, Circleville, OH 43113
 Phone: 740-474-7501 Fax: 740-477-6525
 www.loganelm.org

RESIDENCY VERIFICATION

I, _____, hereby certify that I am a resident of the Logan Elm Local School District. I am aware that Logan Elm Local Schools may use any legal means necessary to verify I am living at the address listed below. I further certify that this residence is located at:

_____ (Number and Road/Street)

_____ (City, State, Zip Code)

This residence:

____ Does not have a separate mailing address

____ Does have a separate Mailing address (PO Box required for areas with no house-to-house delivery)

_____ (PO Box number)

_____ (City, State, Zip Code)

REQUIRED VERIFICATION OF ABOVE ADDRESS.

I. Category A—please provide **one of the following in the name of the parent/guardian**

____ mortgage statement

____ recent property tax bill

____ purchase or closing document

____ lease or rental agreement

____ rent receipt

____ homeowner or rental insurance policy

II. Category B—please provide **one of the following in the name of the parent/guardian**

____ Electric bill

____ Water bill

____ Cable/Internet bill

____ Gas bill

I realize that should any of the above statements be false, I am liable under the criminal code for any penalties that the law provides. Should any of this information be false or if I move out of the district, I agree to pay the tuition cost set for the applicable school year. I agree to pay the tuition rate per day for the student(s) listed below to cover the period during which they illegally attended Logan Elm Local Schools. I understand that immediate withdrawal will also occur. Tuition rates change annually in August.

Documents may be required to be updated by the parent(s) and verified by the school district on an annual basis for continued school attendance. The Board of Education reserves the right to require additional documentation to establish residence to the satisfaction of the superintendent or designee as needed.

Student Name _____ Grade _____

Student Name _____ Grade _____

Student Name _____ Grade _____

Student Name _____ Grade _____

Signature of Parent/Guardian: _____ Date: _____

Relationship to Student(s) _____

