

FORT BEND INDEPENDENT SCHOOL DISTRICT
DUAL/CO-RESIDENCE AFFIDAVIT

For the above SCHOOL YEAR _____

Please Note: If parent/legal guardian owns a home in FBISD, student must attend zoned school of the parent's/legal guardian's FBISD address.

DIRECTIONS: This form must be completed in its entirety (signed by the parent/guardian as well as the owner/leaseholder in front of a Notary Public). Then, the parent/guardian must take the notarized affidavit along with the required documents and an updated copy of the owner/leaseholder's driver's license to your zoned campus. The completed/notarized form and all required documents for enrollment are then to be taken to each child's campus listed on this form. See FD-Legal. **Please note: Dual/Co-Residence students are not eligible to receive an Intra-District Transfer.**

WARNING: Falsifying information on this form is a violation of the law. Violation may result in prosecution. **TEXAS PENAL CODE: Section 37.10** – Tampering with Governmental Records (**Class A Misdemeanor**) – Any person adjudged guilty of a **Class A Misdemeanor shall be punished:**

- (1) A fine not to exceed \$2,000
- (2) Confinement in jail not to exceed one year, or
- (3) Both such fine and imprisonment.

TEXAS EDUCATION CODE: Section 25.001(h) – In addition to the penalty provided by **Section 37.10, Penal Code**, a person who knowingly falsifies information on a form required for enrollment of a student in a school district is liable to the district if the student is not eligible for enrollment on the basis of the false information. The person is liable, for the period during which the ineligible student is enrolled, for the greater of:

- (1) The maximum tuition fee the district may charge under **Section 25.038 of this code, or**
- (2) The amount the district has budgeted for each student as maintenance and operating expenses.

HOME OWNER/LEASEHOLDER: I, _____, affirm that the following Parent/Guardian,
(Name of Owner/Leaseholder)

_____, whose last place of residence was at _____
(Name of Parent/Guardian) (Parent/Guardian Address – Include Apt. #)

_____, and their school age children listed below live with me at my residence, which is
(P/G Address continued – City, State, Zip)

located at _____ in the Fort Bend ISD.
(Full Address of Owner/Leaseholder)

If I am not the owner of said residence, I affirm that the following owner/apartment manager has been made aware of and has approved of this Dual/Co-Residence accommodation: _____
(Name of Owner of the Residence or Apartment Manager)

(Owner of Residence or Apartment Manager's Telephone Number – include area code)

(Name of Apartment Complex if applicable)

PARENT/GUARDIAN: I hereby affirm that I have read and understand the above written warning concerning falsifying information for enrollment is subject to criminal prosecution. I understand that the principal may withdraw my child (ren) listed below if it is determined that I do not reside in the FBISD at the owner/leaseholder address listed above. I further understand and agree that if I am found to have falsified documents to enroll my child (ren), I am liable to the District for the educational costs under **TEXAS EDUCATION CODE: Section 25.001(h)**. As parent/legal guardian, I understand that my driver's license must be changed to reflect the address listed as my place of Dual/Co-Residence within thirty (30) days of the date of this approved application and agree to present proof upon receipt. I understand that I must apply for Dual/Co-Residency each school year and notify the school of any changes of address or contact information.

STUDENT'S FULL NAME	AGE	GRADE	FBISD SCHOOL ASSIGNED

(Signature of Home Owner/Leaseholder)

(Signature of Parent/Guardian)

State of Texas

County of _____

Before me, _____, on this day personally appeared _____, known to me (or proved to me on the oath of _____ or through (description of identify card or other document)) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, 20____.

(Personalized Seal/Stamp)

(Notary Public's Signature)

Required documents:

1. Valid ID from FBISD Parent/Guardian and Homeowner/Leaseholder (Must be current address)
2. Deed of Trust (showing physical address), Property Taxes, Mortgage statement or tax appraisal – all must be current.
Property Lease – Recently expired lease must either have approval from Landlord or current receipt for rental payment.
3. Must supply contact number for landlord or apartment complex in case additional verification is needed.
4. Additional information may be requested, as needed for proof of residency.

FBISD USE ONLY	
Homeowner/Leaseholder TDL, TID, Passport, or Mexican Consulate I.D. Card/Voter's Card No. & Exp. Date:	_____
Parent/Guardian TDL, TID, Passport, or Mexican Consulate I.D. Card/Voter's Card No. & Exp. Date:	_____
Deed <input type="checkbox"/> Lease <input type="checkbox"/> Notarized Letter <input type="checkbox"/> Property-Tax Statement <input type="checkbox"/> Mortgage payment Statement <input type="checkbox"/> FBCAD <input type="checkbox"/>	
Approved <input type="checkbox"/> Denied <input type="checkbox"/> FBISD Campus Personnel Signature:	_____