



# EASTON, REDDING, AND REGION 9 SCHOOL DISTRICTS

654 MOREHOUSE ROAD, P.O. BOX 500 EASTON, CONNECTICUT 06612  
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## AFFIDAVIT FOR PURPOSES OF RESIDENCY

**IT IS A VIOLATION OF CONNECTICUT CRIMINAL STATUTE, CGS 53A-157, TO MAKE A FALSE WRITTEN STATEMENT. THE POLICE DEPARTMENTS IN EASTON and REDDING ASSIST THE BOARDS OF EDUCATION IN INVESTIGATIONS OF PUPIL RESIDENCY CLAIMS. FRAUDULANT CLAIMS ARE SUBJECT TO PROSECUTION.**

Students Parent/Guardian Names: (Please Print) \_\_\_\_\_

1. I (We) currently reside with (*Homeowners Name*): \_\_\_\_\_

Street Address \_\_\_\_\_

In the Town of Easton or Redding, in the State of Connecticut.

2. I (We) intend such residence\* to be permanent.

3. I (We) intend such residence to be provided without payment.

4. Such residence is being provided without payment.

5. Our residence is **NOT** for the sole purpose of obtaining school accommodations in the Easton/Redding/Region 9 School District.

***\*RESIDENCE shall refer to domicile, i.e. a person's true, fixed and permanent home or place of habitation, where he or she intends to reside permanently.***

Student's Name(s), Grade(s), and School(s)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Resident Homeowner's Signature

\_\_\_\_\_  
Date

**THIS AFFIDAVIT MUST BE SIGNED AND NOTARIZED**

STATE OF CONNECTICUT )  
 )ss:  
COUNTY OF FAIRFIELD )

***This affidavit is valid for 1 school year and must be resubmitted every year for children's enrollment in ER9 schools. School Year \_\_\_\_\_***