Packet B Page 1 of 2

2021-2022

Friendswood Independent School District

Application for Determination of Minor's Bona Fide Residence

FOR A MINOR LIVING SEPARATE AND APART FROM HIS/HER PARENT OR GUARDIAN (TO BE COMPLETED BY THE PERSON ASSUMING CUSTODIAL RESPONBILITY)

l.	By agreeing to be the educational custodian for a student, I am legally responsible for the student's attendance at school. If the student is found to be truant, I understand that the school may file truancy charges against me and I will be required to appear in court. If truancy charges are filed against me, I may be fined by the courts (initials)							
II.	By agreeing to be the educational custodian for a student, I agree to provide a daytime telephone number where the school may contact me regarding educational matters. I understand that I may be required to appear at the school to assist in resolution of disciplinary issues (initials) Texas law states that a child's legal residence is determined by where he/she sleeps at night. By signing the admission document, I							
III.	 ·							
IV.	37.10. In add	ned that a student is unlar lition, the District shall req time during which the stud	uire the parent, legal g	uardian, or o	ther adult v	vith lawful control ove	arges under Penal Code r the student to pay tuition for	
	SIX documents m	nust be submitted along wit	th this application to the	FISD Adminis	tration buildi	ng for approval and at the	e time of enrollment to verify the	
<mark>- Resident's Cւ</mark>		Photo Id (gas, water, electric) rtgage Statement, deed or		<mark>ey Affidavit</mark>	_	- Resident'	s Government Issued Photo Id	
Name of Student:	Last	First	Student's	Age	Grade Level	DOB	Campus Based on Custodian's	
				3			Residence	
School last attended	d:	Home Address:	City			State	Date Withdrew	
Within the preced	ding year, did the	student engage in conduct re	esulting in removal to an all	ernative educ	ation prograr	n? Y	'es No If Yes, explain on back.	
Within the preceding year, did the student engage in conduct resulting in expulsion? Yes						'es No If Yes, explain on back.		
Is the student currently on probation or conditional release for delinquent conduct or conduct in need of supervision?							es No If Yes, explain on back.	
Is the student on	probation or cond	ditional release following conv	viction of a criminal offense	?		Y	es No If Yes, explain on back.	
Is the student red	questing enrollme	nt for academics or for the pu	rpose of participating in ex	tra-curricular	activities?	Y	es No If Yes, explain on back.	
		Information	on for Person Assu	ming Cust	odial Res	ponsibility		
Full name of person((s) with who the stud	ent is residing with in Friendswood	d ISD:			Phone #	Alternate Phone #	
Address:	Street	ť	City		I	State	Zip	
Relationship to th	ne student:				Date the st	udent started residing at	this address:	
Reason for the student living at this address:					How long will the student reside at this address:			
How many nights	s per week will the	e student sleep at each of the	following?					
Custodian(s):	(nig	hts) Parent/Guardian: _	(nights)	Other (speci	fy:)	(nights)	
As custodian of t	he student, will yo	ou claim him/her as a depend	ent on your Federal Incom	e Tax as allov	ved by federa	ıl law?	Yes No	
			Parent/Guard	ian Inform	ation			
Full name of Parent/	Guardian:					Phone #	Alternate Phone #	
Address:	Street	:	City		L	State	Zip	
FOR OFFICE US Birth Certificate	E ONLY	Student in a hora fide wast	lant in the EICD Attand	o Zono	Signatura of	A dministrato-	Det	
Birth Certificate Parent's Govt Issued F Resident's Govt Issued Resident's Current Util Resident's Current Lea	d Photo ID	Student is a bona fide resid	ient in the FISD Attendanc	e zone	oignature of a	Administrator	Date	

Packet B Page 2 of 2

Assumption of Parental Responsibility and Acknowledgements

I / We, the person(s) specified as individual(s) with whom applicant is residing within Friendswood ISD in the foregoing application (Child's Name) hereby swear or affirm that every statement contained in the foregoing	
application is within my knowledge true and correct, I/We further agree to assume the obligations of parent(s) of said applicant ir	nsofa
as Friendswood ISD is concerned, so long as applicant is a minor and is attending schools in Friendswood ISD and do hereby a	igree
to be responsible for all matters as stated in this application. I am aware that the applicant must be a full-time resident in my hor	ne to
be considered a resident of Friendswood ISD and that any violation of this policy will result in immediate withdrawal of the stude	nt. I
am aware that if this student moves from my home, I am required to immediately report this to Friendswood ISD.	

I also understand that this document must be completed prior to the beginning of each school year to establish a minor's bona fide residence. I understand if the student in my responsibility fails to abide by all communicated laws, rules and policies in the Student Code of Conduct, Student handbook or any specific campus rules and regulation, the principal or designee shall take disciplinary action as specific in the Code and Handbook and the request for enrollment may be revoked. Finally, I declare that my request for enrollment is not for participation in UIL activities and understand that transfer students may not be eligible for participation in UIL activities. The District Executive Committee or District Administrators will make the determination. I am aware that a person who knowingly falsifies information on a form required for a student's enrollment in the district shall be liable to the district for the payment of the daily tuition rate if the student is not eligible for enrollment. Presenting a false document or record is a violation of Texas Education Code 25.002(h) and Penal Code 37.10 and will be prosecuted to the full extent of the law by Friendswood ISD.

FALSIFICATION OF INFORMATION ACKNOWLEDGEMENT

I declare that I have provided no false information to the Friendswood Independent School District with regard to my family's residence. I understand that a person who knowingly falsifies information on a form required for enrollment of a student in a school district is liable for full tuition if the student is not eligible for enrollment in the district and is enrolled on the basis of this false information. I understand that falsifying this sworn affidavit is a **criminal offense (Perjury)** under Section 37.01 of the Texas Penal Code, which is a Class A misdemeanor punishable up to one (1) year of confinement in jail; a fine not to exceed \$2,000.00; or both such fine and imprisonment. Another criminal offense for falsifying this residency information is a violation of Texas Penal Code 37.10: **Tampering with a Government record**. Any falsification of information shall cause this request to be denied and/or revoked.

I understand that this child will be administratively withdrawn from FISD if it is determined that I have enrolled the child based on false information. I also understand that FISD utilizes law enforcement to verify residency. A random check to the physical Friendswood address may occur. I agree to cooperate fully with the officer or an officer of the school district verifying residency. Signature of Person(s) with Custodial Responsibility Date STATE OF COUNTY OF BEFORE ME, the undersigned authority, on this day personally appeared_ known to me to be the person whose named is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and considerations therein expressed. GIVEN under my hand and seal of office on this , 20 day of **Notary Signature**

(Affix Notary Seal)

FRIENDSWOOD INDEPENDENT SCHOOL DISTRICT POWER OF ATTORNEY AFFIDAVIT

For parents giving education rights to another adult

I, Parent or Legal Guardian		, residing at				
Parent or Legal Guardian						
Address: Street, City, State, Z	ip Code	, Primary Telephone Number				
	do hereby grant to					
Relationship to Student		Name of Adult Guardian				
who resides at	Address: Street C	ity, State, Zip Code				
	Address. Street, Of	ny, state, zip sode				
Primary Telephone Number		Alternate Telephone Number				
the following rights with respe	ct to:					
<u>Name</u>	<u>Age</u>	<u>Campus/Grade</u>				
		of the 2021-2022 school year. During this period, the above-may be necessary to enable my child to receive an appropriate				
1. The duty of care, control, protection and reasonable discipline of the child;						
The power to consent to medical and surgical treatment during any emergency involving an immediate danger to the health and safety of the child;						
3. The right to consult with school officials concerning the child's welfare and educational status, including school activities, and to make decisions of educational significance to the child;						
4. The right to attend school	activities relating to the child	d;				
5. The right of access to educ	cational records;					
6. The right to receive any form of notice from school officials that otherwise would be provided to me, as parent or legal guardian of the child; and						
7. The right to be designated	on any records as a perso	n to be notified in case of emergency regarding the child.				
<u>FALSIFIC</u>	<u>ATION OF INFORMAT</u>	TION ACKNOWLEDGEMENT				
worn affidavit is a criminal offen nable up to one (1) year of conf	se (Perjury) under Section inement in jail; a fine not to	ood Independent School District (CCISD). I understand that falsifying n 37.01 of the Texas Penal Code, which is a Class A misdemeanor to exceed \$2000.00; or both such fine and imprisonment. Another as Penal Code 37.10: Tampering with a Government record .				
t/Guardian's signature		Date				
E OF\$ COUNTY ()F					
ORE ME, the undersigned authorit erson whose named is subscribed to onsiderations therein expressed.	y, on this day personally ap the foregoing instrument a	ppearedknown to me to be and acknowledged to me that he/she executed the same for the purpose, 20				

Notary Signature (Affix Notary Seal)