



## Bromwell Elementary School

### Co-Resident Registration and Verification of Residency

*This form must be completely filled out and notarized prior to approval.*

#### Resident Information:

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Street) (City) (Zip Code)

Home Phone Number: \_\_\_\_\_

Children Attending DPS:  Yes  No

Residence is:  Owned  Rented / Leased

2 Forms of Proof for Residency Provided:  Signed Lease or Deed; or  Tax Bill; AND  Current Gas or Electric Bill

#### Co-Resident Information:

Parent/Guardian Name: \_\_\_\_\_

Student Name(s): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Date moved in as Co-Resident: \_\_\_\_\_

Expected length of Co-Residency: \_\_\_\_\_

Reason for Co-Residency: \_\_\_\_\_

I hereby certify the student(s) listed above resides at the above address which is within the Bromwell Elementary School boundaries.

2 Forms of Proof of Residency to address for Co-Resident:  Addendum to Lease or Deed with name added

Mail received to address

New Colorado driver's license

Bank Statement

Car insurance/registration

Other \_\_\_\_\_

; AND

Notarized Letter from Resident Owner / Landlord Verifying Co-Residency of Your Family or Child(ren)

*Under penalty of perjury, I affirm that all information given above is true and correct. I further understand and agree that, if it is later determined that this family is not a legal resident within the Bromwell Elementary School boundary, such students may be withdrawn from Bromwell Elementary School. I further agree to pay Bromwell Elementary School any and all applicable tuition charges that may be due, together with the cost of collection thereof, including reasonable attorney's fees. A person commits perjury in the second degree if, he or she makes a statement with an intent to mislead a public servant in the performance of his duty.*

Colorado Revised Statutes, Sec 118-8-503, 108-1-106

\_\_\_\_\_  
(Resident)

\_\_\_\_\_  
(Co-Resident)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public)

My Commission Expires: \_\_\_\_\_