



Ballard Community Schools

Co-Resident Registration

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

Ballard Resident Information:

Today's Date: _____

Name: _____

Address: _____

(Number & Street)

(Apt/Lot#)

(City)

(Zip Code)

Home or Cell Phone Number: _____

Children Attending Ballard CSD:

Yes

No

Residence is:

Owned

Rented/Leased

****Proof of Residency Attached:**

Print out from Story County Assessor site Current Utility Bill with Ballard address listed (current is defined as within the past 30 days)

Current signed lease agreement

Ballard Co-Resident Information:

Parent/Guardian Name: _____

Student Name(s): _____

Move-in date: _____ **Expected length of Co-Residency:** _____

Reason for Co-Residency: _____

****Proof of Residency for Co-Resident Attached:**

- Addendum to Lease or Deed with name added
- Current utility bill or any other bill mailed to the above Ballard address
- A pay stub from your current employer showing Ballard address
- US Mail forward confirmation
- Other _____

By signing this form you are affirming that all information given above is true and correct and that this is the legal residence of the parent/guardian and student(s). Should the district learn that this family is not a legal resident of Ballard Community School District such students will be withdrawn immediately from Ballard Schools. If this should happen I understand that I will be held liable to reimburse the school district of any tuition incurred for the time in attendance as a non-resident student.

(Resident)

(Co-Resident)

Sworn to before me this _____ day of _____, 20_____

Notary Public: _____

(Place Notary Seal or Stamp below)