CUSTODIAL PARENT'S AFFIDAVIT ONLY VALID FOR THE CURRENT SCHOOL YEAR

STATE OF MISSOURI)		
COUNTY OF JACKSON)ss.)		
Date			
This is to certify that(Na	ame of student)	_and (Custodial parent/guardian{s})	_ are living with
(Name of R-7 Res	atat	(Resident Address)	<u> </u>
The student is attending	(Lee's Summit School)	for the remainder of the(Year	school year.

In accordance with state statute, anyone who knowingly falsifies a statement of residence is guilty of a class A misdemeanor. The District may file a civil action suit for the purposes of recovering the costs of school attendance. To ensure the validity of these documents the Lee's Summit R-7 School District will conduct residency checks throughout the school year. These residency checks are conducted by Lee's Summit R-7 School Resource Officers and school district staff.

I acknowledge that if investigation reveals that I did not provide true information, the above child will be withdrawn from Lee's Summit R-7 School District and I may be obligated to pay any tuition monies then due. The tuition rate for each full-day student is over \$55 per day or in excess of \$9,500 per year.

Printed Name of Custodial Parent/Guardian

Signature of Custodial Parent/Guardian

Subscribed and sworn to before me this _____day of _____, 20____.

Notary Public

My Commission expires:

RESIDENT'S AFFIDAVIT ONLY VALID FOR THE CURRENT SCHOOL YEAR

STATE OF MISSOURI)		
COUNTY OF JACKSON)ss.)		
Date			
This is to certify that(Nam	e of Student)	and (Custodial Parent/Guardia	are living with me
at	(R-7 Resident Address)		
The student is attending	(Lee's Summit School)	for the remainder of the	school (Year)

year.

In accordance with state statute, anyone who knowingly falsifies a statement of residence is guilty of a class A misdemeanor. The District may file a civil action suit for the purposes of recovering the costs of school attendance. To ensure the validity of these documents the Lee's Summit R-7 School District will conduct residency checks throughout the school year. These residency checks are conducted by Lee's Summit R-7 School Resource Officers and school district staff.

I acknowledge that if investigation reveals that I did not provide true information, the above child will be withdrawn from Lee's Summit R-7 School District and I may be obligated to pay any tuition monies then due. The tuition rate for each full-day student is over \$55 per day or in excess of \$9,500 per year.

	Printed Name of Lee's Summit Resident		
	Signature of Lee's Summit Resident		
	Phone Number of Le	e's Summit Resident	
Subscribed and sworn to before me this _	day of	, 20	

Notary Public

My Commission expires: