

Complete only if "Other" was selected on the Arizona Residency Documentation Form.



## State of Arizona Affidavit of Shared Residence

Student Name: \_\_\_\_\_ School Name: \_\_\_\_\_

School District: Catalina Foothills School District

Parent/Legal Guardian: \_\_\_\_\_

Name of Arizona Resident: \_\_\_\_\_

I, (resident name) \_\_\_\_\_, swear or affirm that I am a resident of the State of Arizona and that the persons listed below reside with me at my residence, described as follows:

Persons who reside with me:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location of my residence:

Street address	City	State	Zip Code
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I submit in support of this attestation a copy of one (1) item from **each** of the sections below that displays my name and current residence address or physical description of my property:

Submit one (1) item from section One:

- \_\_\_\_\_ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- \_\_\_\_\_ Valid Arizona Address Confidentiality Program authorization card (*for participants in the Arizona Address Confidentiality Program ("ACP"), an ACP Authorization Card may be accepted in lieu of documentation showing the residential address or property description where the student resides*)
- \_\_\_\_\_ Water, electric, gas, cable, or phone bill
- \_\_\_\_\_ Bank or credit card statement
- \_\_\_\_\_ W-2 wage statement
- \_\_\_\_\_ Payroll stub

Submit one (1) item from section Two:

- \_\_\_\_\_ Real estate deed or mortgage documents
- \_\_\_\_\_ Property tax bill
- \_\_\_\_\_ Rental agreement or lease (including Section 8 agreement or off-base military housing)
- \_\_\_\_\_ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe located in Arizona.
- \_\_\_\_\_ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
- \_\_\_\_\_ Temporary on-base billeting facility (for military families)

Continue to side 2



Printed Name of Affiant: \_\_\_\_\_

Signature of Affiant: \_\_\_\_\_

**Acknowledgment**

State of Arizona  
County of Pima

The forgoing was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

By \_\_\_\_\_.

My Commission Expires

\_\_\_\_\_

Notary Public

In signing this form, I declare and certify that the information I have provided and the statements I have made are material and true under penalty of perjury (Arizona Revised Statutes 13-2702) and are not a scheme, artifice, or practice to defraud the School District (Arizona Revised Statutes 13-2310 and 2311). I acknowledge that there may be additional civil and/or criminal liability if the information and statements I have made in this form are false or misleading.

In addition, I will contact the School District at 2101 E. River Road, Tucson, Arizona, 85718, if either the student(s) or I no longer live at the address provided to the School District.