



**BEDFORD PUBLIC SCHOOLS
OCCUPANCY STATEMENT/AFFIDAVIT**

I/We, the parent(s), legal guardian(s) of: _____
Print student's full name

Hereby certify as follows:

1. I/We wish to enroll the above named student in the Bedford Public Schools. I/We understand that pursuant to Massachusetts General Law (Chapter 76, Section 5) and Bedford Public School's Policy, students who actually reside in the Town of Bedford may attend the Bedford Public Schools and students who do not actually reside in the Town of Bedford may not attend the Bedford Public Schools.
2. I/We hereby certify that effective _____, 20____, the above named student is/will be residing at the following address in Bedford, Massachusetts, with:
Printed name of Parent/Guardian: _____
Address: _____ Bedford, MA 01730
Home Telephone #: _____ Cell Phone #: _____
Work Phone: _____
3. I/We acknowledge that I am/we are required to notify the Bedford Public Schools or the above student's school, in writing. Of any change in said student's address within five (5) business days of such change of address.
4. I/We understand that this Occupancy Statement will be relied upon by the Bedford Public Schools for the purpose of determining the above student's eligibility to attend the Bedford Public Schools based upon the information provided. If it is subsequently determined that the student does not actually reside in Bedford, I/we understand that the student's enrollment in the Bedford Public Schools will be promptly terminated and I/we will be jointly liable to the Bedford Public Schools for the student's tuition for the full academic year(s).
5. I/We further certify that I am/we are the parent(s), legal guardian(s) of the above named student.

6. I/We understand that all applicants must reside in the Town of Bedford as outlined in Massachusetts General Laws Chapter 76, Section 5 which states:

Every person shall have a right to attend the public schools of the town where he/she actually resides, subject to the following section. No school committee is required to enroll a person who does not actually reside in the town unless said enrollment is authorized by law or by the school committee. Any person who violates or assists in the violation of this provision may be required to remit full restitution to the town of the improperly attended public schools. No person shall be excluded from or discriminated against in admission to a public school of any town, or in obtaining the advantages, privileges and courses of study of such public school on account of race, color, sex religion, national origin or sexual orientation (Amended by st. 1971, c622, c.l.; st 1973, c.925, s.9A, st. 1993, c282; st.2004, c.352, s.33)

Signed under the pain and penalties of perjury on this ____ day of _____, 20__.

Signature of Parent/Guardian (Please circle Relationship)

Signature of Parent/Guardian (Please circle Relationship)

This form must be accompanied by proof of residency which is at least one document from each of the following three columns: A, B, and C or D if student is a Hanscom AFB Resident. (See Chart Attached.)

Statement of Notary Public:

Commonwealth of Massachusetts

Middlesex County, ss.

On this ____ day of _____, 20__, before me, the undersigned notary public,

personally appeared _____, proved to me through

(Name of Parent/Guardian who signed form)

satisfactory evidence of identification, which were _____,

to be the person whose name is signed on the preceding or attached document, and

acknowledged to me that he/she signed it voluntarily for its stated purpose.

Notary Public

My Commission Expires: