## EAST PROVIDENCE SCHOOL DEPARTMENT 145 TAUNTON AVENUE, EAST PROVIDENCE, R.I. 02914 TELEPHONE: 431-4632 FAX: 572-3875

# Boys and Girls Club BEFORE and AFTER SCHOOL DAYCARE TRANSPORTATION APPEAL FORM FOR SCHOOL YEAR 2017—2018

| (PLEASE PE                                    |   |                   |                                 |   |
|---|---|-------------------|---------------------------------|---|
| STUDENT N                                     | AME   |                   | GRADE                           | SCHOOL  |
| STUDENT A                                     | DDRESS  |                   |                                 | TELEPHONE   |
| 1 would lik                                   | te to request transporta  | tion for my child | d as follows: (pl               | ease check):  |
|   | To school   | (a.m.) I          | From school (p.                 | m.)   |
| responsible                                   | re expected to follow t<br>e for notifying the Tra<br>o adhere to the Monda | nsportation Dept  | (401-431-4632                   | tions at all times. Parents are   |
| Name of                                       |   |                   |                                 |   |
| Parent/Gua                                    | ardian  |                   |                                 |   |
| Parent/Gua                                    | ardian Signature  |                   | Print                           | Date  |
| Students won bus rout You will be completed a | ho are not eligible for t<br>te.<br>e notified by telephone i               | ransportation man | ay be approved s been granted o | rtation upon availability. providing there is room available or denied. Appeal forms must be asis and must be accompanied |
| Transportati                                  | ion use only:   |                   |                                 |   |
| Denied:                                       | Approved:   | Start Date        |                                 |   |
| Bus #   | Pick-Up Time  |                   |                                 |   |
|   | Return Time   |                   |                                 |   |

#### EAST PROVIDENCE SCHOOL DEPARTMENT PROOF of RESIDENCY PROCEDURE

All students requiring educational or related services through the City of East Providence must first prove legal residence in the City. Students include all school age children attending district public schools, as well as children attending private and/or parochial school, or being homeschool, and requesting services, such as but not limited to transportation, special education and related services, books etc.

Only a Parent and/or Guardian can register, change the address, and prove residency.

Three (3) such forms to prove residency are required. One item from each column below needs to be selected and presented at the time of registration, or change of address occurs. They must be in the name of the student's parent/guardian.

| Column A   | Column B                                  | Column C                      |  |
|--|---|-------------------------------|--|
| Copy of Mortgage Deed and  | Utility Bill Statement                    | Current Vehicle Registration  |  |
| most recent mortgage<br>payment  | <ul><li>Gas</li><li>Oil</li></ul>         | Payroll Stub (last 30 days)   |  |
| Copy of Lease and most   | <ul><li>Electric</li><li>Cable</li></ul>  | Bank Statement (last 30 days) |  |
| recent rent payment  | <ul><li>Telephone</li><li>Water</li></ul> | W-2/Tax Return (past year)    |  |
| Section 8 Agreement  | Student Loan                              | Property Tax Bill (past year) |  |
| Legal affidavit from Landlord<br>affirming tenancy and most<br>recent rent payment | Credit Card Statement                     | Vehicle Tax Bill (past year)  |  |



### EAST PROVIDENCE SCHOOL DEPARTMENT Residency Affidavit-Landlord/Shared Tenancies



INSTRUCTIONS:

Any applicant for the East Providence Public Schools who cannot produce a property deed or lease must ask the owner or lessee of the property where the applicant lives to complete and sign this legal affidavit.

It is the responsibility of the applicant (not the person who completes this affidavit) to attach a record of rent payment, unless this affidavit affirms in #3 below that the tenancy does not require payment of rent.

### AFFIDAVIT

| My name is                |                        | and J                          | Lhereby depose   |
|---------------------------|------------------------|--------------------------------|------------------|
| and certify as follows: ( | Please complete all    | three items and sign below)    |                  |
| • •                       |                        | •                              |                  |
| a H                       |                        | 4. A .4                        |                  |
| 1. I am the owner/les     |                        | ted at                         |                  |
| in the City of East       | . Piovidence.          |                                |                  |
| 2                         | •                      | , who is the parent or le      | gal guardian of  |
| -                         | •                      | leases or sublea               | ases this        |
| property as their p       | rincipal residence fro | om me, without a lease, in a t | enancy at will,  |
| from month to mo          | nth.                   | •                              |                  |
|                           |                        |                                |                  |
| 3. CHECK ONE:             |                        |                                | •                |
| Thave rece                | ived within the last   | thirty (30) days rental paymen | nt for the lease |
| or sublease of the        |                        |                                |                  |
| •                         | <u>-</u> .             | •                              |                  |
| OR.                       |                        |                                | in with me of    |
|                           |                        | t the party named above resid  | les will the at  |
| the address above         | with no payment of     | ICIII.                         |                  |
| Signed under the pa       | ins and penalties of   | f perjury this day             | ,20:             |
|                           | 2                      |                                |                  |
| •                         | •                      | •                              |                  |
| Notary Public             |                        |                                | <del></del>      |
| Idorat à Lionic           | Print Nam              |                                |                  |
|                           | មួយមួរ ស្រួយ           | ٠٠.                            |                  |
| Date                      | —<br>Print Addr        | ess:                           |                  |

The information contained in this legal affidavit is subject to verification by a residency investigator.