RUNGE INDEPENDENT SCHOOL DISTRICT SHARED RESIDENCE VERIFICATION	
THIS FORM IS TO BE COMPLETED IF RESIDENCY REQUIREMENTS CANNOT BE PROVIDED DUE TO THE FACT THAT THE PARENT AND CHILD (REN) ARE SHARING A RESIDENCE WITH ANOTHER PERSON.	
ALL SECTIONS MUST BE COMPLTED AND SIGNATURES NOTARIZED	
DO NOT SIGN THIS FORM IF ANY OF THE STATEMENTS ARE INCORRECT	
TO BE COMPLETED BY PARENT(S)/GUARDIAN(S):	
STUDENT NAME:	STUDENT NAME:
DATE OF BIRTH:	DATE OF BIRTH:
GRADE LEVEL:	GRADE LEVEL:
	LIST ADDITIONAL STUDENTS ON A BACK OF FORM
FLEASE LIST ADDITIONAL STUDENTS ON A BACK OF FORM	
PARENT(S) NAME:	PARENT(S) NAME:
CELL PHONE #: OTHER PHONE #:	CELL PHONE #: OTHER PHONE #:
0111EK FHONE #	01HER FHONE #
THIS LIVING ARRANGEMENT IS: PERMANENT TEMPORARY IF TEMPORARY LIST DURATION:	
PERMANENT TEMPORAR	Y IF TEMPORARY LIST DURATION:
TO BE COMPLETED BY HOMEOWNER:	
I, DECLARE/CERTIFY THAT I AM THE PRIMARY RESIDENT AT	
I,DECLARE/CERTIFY THAT I AM THE PRIMARY RESIDENT AT (RUNGE RESIDENT'S NAME)	
(STREET)	(CITY) (ZIP CODE)
AND THAT THE ABOVE MENTIONED ADULT(S) AND STUDENT(S) RESIDE WITH ME.	
I AGREE TO NOTIFY RUNGE SCHOOS IF THERE IS ANY CHANGE IN THE STATUS OF RESIDNECE OF THE PERSONS	
LISTED ABOVE. I UNDERSTAND THAT HOME VISITATION IS POSSIBLY A PART OF THE PROCESS OF RUNGE ISD.	
** I FURTHER AGREE TO PROVIDE PROOF OF MY RESIDENCE	
SIGNATURE OF PRIMARY R	ESIDENT DRIVER'S LICENSE/ID NUMBER DATE
STATE OF TEXAS, COUNTY OF KARNES	
ON	_ BEFORE ME:
PERSONALLY APPEARED:	
NAME(S) OF SIGNER(S):	
PLACE NOTARY SEAL BELOW	WHO PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SUBSCRIBED TO THE WITHIN INSTRUMENT, AND ACKNOWLEDGED TO ME THAT
	HE/SHE/THEY EXECUTED THE SAME IN HIS/HER/THEIR AUTHORIZED CAPACIT (IES), AND THAT BY HIS/HER/THEIR SIGNATURE(S) ON THE INSTRUMENT THE PERSON(S), OR THE ENTITIY UPON
	BEHALF OF WHICH THE PERSON(S) ACTED, EXECUTED THE INSTRUMENT. I CERTIFTY UNDER PENALITY OF PERJURY UNDER THE LAWS OF THE STATE OF TEXAS THAT THE FOREGOING
	PARAGRAM IS TRUE AND CORRECT. WITNESS MY HAND AND OFFICIAL SEAL.
SIGNATURE:	
	SIGNATURE OF NOTARY PUBLIC