

West Orange Public Schools

179 Eagle Rock Avenue West Orange, New Jersey 07052

Registration Office

(973) 669-5400 ext. 20505 Fax: (973) 324-1289

CHANGE OF ADDRESS INSTRUCTIONS HOMEOWNER

Please contact the Registration Office, at 973-669-5400, extension 20505, between the hours of 9:00 a.m. and 4:00 p.m., for any questions or concerns. Change of Address documents must be submitted at the Administrative Offices located at 179 Eagle Rock Avenue. Failure to submit all required documentation at the time of submission will not be accepted. The student is not required to be in attendance during the registration process.

CHECKLIST OF DOCUMENTS REQUIRED FOR CHANGE OF ADDRESS: (NO EXCEPTIONS)

<u>Proof of Residency for Homeowner</u>: One **NOTARIZED** form and three additional documents as follows:

| • | Certificate of Residency – Homeowner Form: completed and NOTARIZED by homeowner. | |
|---|--|--------------------------------|
| • | Proof of Ownership - please provide one of the following documents: | |
| | | Deed |
| | | Most Recent Municipal tax bill |
| | | Current Mortgage bill |
| • | Proof of Address - please provide two current documents, some examples listed below: | |
| | | Public Service bill |
| | · 🔲 | Water bill |
| | | Cable or satellite bill |
| | | Home or cell phone bill |
| | | Bank or Insurance statement |
| | | Paystub with name and address |

Please be advised that the West Orange Board of Education reserves the right to conduct periodic, random home visits to verify residency of all students enrolled in the district. These visitations are conducted by Residency Verification Officers. Per Board Policy 5111: From time to time the Board of Education may require re-registration of all students.



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CERTIFICATE OF RESIDENCY: HOMEOWNER

(Please Print)

| Parent/Guardian Name | |
|--|--|
| Address | |
| Telephone Cell | Work |
| Student Name (s) | |
| | |
| Do you reside at the above address? | Date moved in |
| Former address | |
| Documents required to accompany this Certification | n: |
| Please Submit: One (1) Proof of Ownership, plus tw | vo (2) current public utility bills for proof of address: |
| | Current Mortgage Statement |
| Proof of Address: PSE&G Cable | |
| Telephone/Mobile Phone Other | |
| I/we further state that this form and the attached d the student(s) identified reside with me/us within the | s) and/or guardian(s), of the student(s) listed above ocumentation constitute true and accurate proof that ne Township of West Orange. If any student named ur residency, I/we will promptly notify the Board of |
| I/we certify that the foregoing statements made by foregoing statements made by me/us are false, I/we and West Orange Municipal Ordinance #2028-05). | me/us are true. I/we am/are aware that if any of the am/are subject to punitive action. (N.J.S.A. 2C:28-2 |
| PLEASE SIGN AND HAVE THE FOLLOWING STA | ATEMENT NOTARIZED: |
| I certify that the information provided above is corre- for the full payment for all days of ineligible school a found to be falsely reported. | ct. I fully understand that I will be held responsible ttendance, if the residence requirements have been |
| Pre-K & Kindergarten \$17,414.00 Grades 1-5 \$ | 19,379 Grades 6-8 \$19,915 Grades 9-12 \$19,932 |
| Signature of Parent/Guardian | |
| NOTARY: Sworn and subscribed before me on this | day of 20 |
| day | month Year |
| Signature of Notary Public of New Jersey | My Commission Expires (Place Seal Below) |
| | |
| Signature of Staff Member Reviewing Residency | <u> </u> |
| organization of organ information residency | |