

Questionable Residency

This form is to be filed whenever you suspect that a student(s) may be attending our school district illegally. Please provide as much information as you can to assist us in making our determination of legal residency. Return the completed form to the Director of Operations at the Administration Center.

Student Last Name: _____ **Student** First name: _____

Address on our records: (street) _____ (city) _____ (zip) _____

Circle the **attendance** center RCPS RCIS RCMS RCHS

If you do not believe the student is at this location where do you believe he/she lives?

Mother Last Name: _____ **Mother** First name: _____

Mother Maiden Name: (if known) _____

Address if different: (street) _____ (city) _____ (zip) _____

Phone number(s) on our records: (home)() - (cell) () -

(work) () - (emergency) () -

If you do not believe the mother is at this location where do you believe she lives?

Father Last Name: _____ **Father** First name: _____

Address if different: (street) _____ (city) _____ (zip) _____

Phone number(s) on our records: (home)() - (cell) () -

(work) () - (emergency) () -

If you do not believe the father is at this location where do you believe he lives?

What reason(s) do you have for suspecting that this student does not reside in Reed-Custer CUSD 255?

If there are any siblings currently attending our schools please provide their information.

Student Last Name: _____ **Student** First name: _____

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Please include any additional information that may assist us in our investigation. (auto make, license number, etc.)

Submitted by:(optional) _____