

GREAT NECK PUBLIC SCHOOLS

Office of Registration and Attendance
345 Lakeville Road
Great Neck, New York 11020

RESIDENCY RE-VERIFICATION CHECK LIST

Student Name: _____

Current School: _____

Parent/Guardian Name: _____

Address: _____

Home Phone Number: _____

As proof of my district residency, I have attached copies of the following:

For Home Ownership: Current School or Town Tax Bill _____

For Co-op Ownership: Proprietary Lease _____

For Home/Apartment Rental: Lease _____ **or Residency Affidavits** _____

AND

2 Pieces of Mail _____ Examples: gas or electric bill, cable bill, water bill, credit card statement, bank statement, insurance bill, telephone bill, etc. Mail must be dated within the last 30 days, and may not be obtained on-line. Personal or junk mail is unacceptable.

AND

Residency Certification (signed & notarized) _____

You must submit these documents in order for your child to receive a 9th grade schedule!

For Office Use Only

Approved _____

Name _____

Date _____