

CERTIFICATION OF RESIDENCY

I and	
I,, and Parent Name (Printed)	Name(s) of Child(ren)
recide at	
reside at:Street Nu	mber, Street Name, Unit
	City, State, Zip
I certify that the above information is true and comple	ete to the best of my knowledge. I understand that if I give
false information I may be prosecuted, imprisoned, an	nd/or fined under law.
Parent/Guardian Signature	Date
SECTION II – NOTARY CERTIFICATION (Notary mu	st complete, sign, and date this section.)
STATE OF FLORIDA, COUNTY OF	<u> </u>
The information in Section I above is sworn to and sul	oscribed before me this day of,
	·································
Signature of Notary Public – State of Florida	
Personally Known OR Produced Identification	<u> </u>
Type of Identification Produced:	
	lord/property owner or leasee/shelter representative
must complete this section.)	-
l,, am a Third Party Name (Printed)	a landlord/property owner or leasee/shelter representative
for the address identified in Section I above and attes	t that the individuals listed in Section I reside there.
I cortify that the above information is true and comple	ete to the best of my knowledge. I understand that if I give
false information I may be prosecuted, imprisoned, an	
, ,	-, - ,
Third Party Signature	