

AR 5111.1 S
DISTRICT RESIDENCY

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A student shall be deemed to have complied with District residency requirements if he/she meets any of the following criteria:

1. The student's parent/guardian resides within District boundaries (Education Code [48200](#)).
2. The student is placed within District boundaries in a regularly established licensed children's institution, a licensed foster home, or a family home pursuant to a court-ordered commitment or placement. (Education Code [48204](#))
3. The student is an emancipated minor residing within District boundaries. (Education Code [48204](#))
4. The student lives with a caregiving adult within District boundaries. (Education Code [48204](#))
- 5.

The acceptable current proofs of Berkeley residency documentation must

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Depending on the individual student's circumstances, at times it may be necessary to conduct residency verifications to ascertain the student's domicile.

In the event that a family is not able to provide the necessary proofs of residency, the Superintendent or designee may determine whether a home visit is necessary to satisfy the residency requirements.

When the Superintendent or designee reasonably believes that a family has provided false or unreliable documentation, the Superintendent or designee may make

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The goal of the admissions process is to efficiently and equitably assist Berkeley parents and guardians when enrolling in Berkeley public schools and ensure that

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I, (parent/guardian's name) _____ declare,
that the Berkeley residency information provided below is true and correct.

Home Address: _____ Berkeley, CA 947 _____

Parent/Guardian Home Phone: _____ Day Phone: _____

Email address of Parent/Guardian: _____

The following student(s) reside in my Berkeley household, and I am attaching the
required proofs of residency.

Student Name: _____

Date of Birth: _____ School: _____ 2015-16 Grade: _____

Student Name: _____

Date of Birth: _____ School: _____ 2015-16 Grade: _____

Student Name: _____

Date of Birth: _____ School: _____ 2015-16 Grade: _____

Student Name: _____

Date of Birth: _____ School: _____ 2015-16 Grade: _____

I certify that my child and I are residents of the city of Berkeley. Depending on the
individual student's circumstances at times it may be necessary to conduct residency
verifications to ascertain the student's domicile. If residency verification efforts
determine that we do not reside in Berkeley, I realize that my child may be dropped
from enrollment and returned to his/her district of residence within twenty _____