

Bethel Public Schools

1 School Street, P.O. Box 253, Bethel, CT 06801 Fax: (203) 794-8723 – website: www.bethel.k12.ct.us

NOTARIZED LANDLORD AFFIDAVIT

Instructions:

Signed:

Notary Public Signature and Stamp

Any applicant for Bethel Public Schools who cannot produce a lease agreement, whose lease is weekly or month-to-month, or whose lease is expired, is required to have the owner/management of the property where the applicant resides fill out this form and have his/her signature notarized. Affidavits will be verified for authenticity by the Bethel Board of Education. If you have any questions, please contact our District Registrar, Laurel McCollam at (203) 830-7355.

My name is	_and I hereby depose and	certify as
My name is	ve's Name (please print)	
follows: I am the owner/manager of the property located	l at	
	Property Address (please print)	
in the Bethel school district.		
	, who is the parent or legal guardian of student,	
Parent's/Guardian's Name (please print)		
	, leases this property as his/her primary residence from me, with	hout
Student's Name (please print)		
a written lease, in tenancy at will.		
**This form expires one (1) year from the date of signature	re below.	
	rided is accurate. I authorize representatives from Bethel to verify information may result in revocation of registration for the	^f y
MUST BE SIGNED IN THE PRESEN	CE OF A NOTARY PUBLIC OFFICIAL ONLY	
Print:		
Property Owner/Management Representative's N	lame Contact Phone Number	
Signed:	Date:	
Signed:		