



Tom Smith  
Principal

VANSVILLE ELEMENTARY SCHOOL  
*HOME OF THE WILDCATS*

6813 Ammendale Road, Beltsville, MD 20705  
301-931-2830 Phone 301-931-2840 Fax  
<http://www.pgcps.org/vansville>



Shawna Holden  
Assistant Principal

Dear Parent(s)/Guardian(s):

Welcome to Prince George's County Public Schools (PGCPS). In accordance with PGCPS enrollment policy, all school registrars/attendance secretaries must verify the residency of prospective students. Prior to enrolling at a school, all parents/court-appointed guardians must provide school personnel with proof of residency. In a shared housing situation, the parent/guardian must satisfy the following residency requirements.

1. Complete and have notarized the Shared Housing Disclosure Form. This form is to be completed by you and the homeowner/renter. When returning this form to the home school, please attach the homeowner's/renter's proof of residency.
2. Within thirty (30) calendar days of your child's enrollment, you will be required to present a minimum of two (2) recent original official pieces of mail. Examples of official mail are: bank statement, current payroll stub, employer verification on company stationery, current income tax form 1099 (preaddressed form), official letter from management company verifying current address, official county agency correspondence, gas bill, water bill, or electric bill.) If the school does not receive this documentation, your child will be withdrawn.
3. I understand that it is my responsibility to notify the school of any change in my residence.
4. I understand that failure to provide proof of residence or updated information on request will result in my child being withdrawn.

If you have any questions or concerns, please contact the school.

JOY A. PINKNEY  
\_\_\_\_\_  
Registrar/Attendance Secretary

TOM SMITH  
\_\_\_\_\_  
Principal

(Revised April 2008)

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*Imagine, Believe, Achieve*

**VANSVILLE ELEMENTARY SCHOOL  
(SHARED HOUSING DISCLOSURE FORM)**

**INSTRUCTIONS:** To be completed by parent(s)/court-appointed guardian(s) when residing in a shared housing situation. The parent(s)/guardian(s) must obtain the signature of the person who owns or rents the residence.

<u>Name(s) of Student(s)</u>	<u>Date of Birth</u>	<u>Grade</u>

Street Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

It is understood that the parent/guardian of the above-named student(s) is seeking to enroll their child/children in the Prince George's County Public Schools. As long as the above-stated address is the bona fide residence of the student(s) and parent(s)/court-appointed guardian(s) the student will be allowed to enroll. In thirty days, the person enrolling the student will need to present official mail going to the address of the parent. If a change in the bona fide residence occurs, it is the responsibility of the parent(s)/legal guardian(s) and homeowner, to notify the school(s) immediately.

It is understood that the information provided by the undersigned is accurate. Any attempt to falsify information shall result in withdrawal of the student, and the appropriate tuition charge shall be assessed.

As the homeowner(s) or renter(s) of the resident at the address listed above, I/we acknowledge that the above-named individual and their school-age children are residing with me/us. They are residing with me/us in good faith and not solely for the purpose of attending public school in Prince George's County and avoiding non-resident tuition. I agree to provide settlement papers, rental receipt, property tax bill, lease agreement, mortgage statement, or deed of property. If rental lease is over a year old a current utility bill or recent mail from the homeowner will also be provided.

The undersigned do hereby attest to the accuracy of these statements.

PLEASE PRINT NAME	PLEASE PRINT NAME
Signature of Owner(s) or Renter(s)	Signature of Parent(s) Court-Appointed Guardian(s)

I hereby certify on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, that the above subscribers personally appeared before me and made oath in due form of the law and that the foregoing facts are true to the best of their knowledge, information and belief, under penalty of perjury.

My Commission Expires: \_\_\_\_\_ Notary Public \_\_\_\_\_

School Name: VANSVILLE ELEMENTARY SCHOOL Date: \_\_\_\_\_

Principal/Designee: \_\_\_\_\_ Phone No. \_\_\_\_\_