

**NORTH WARREN CENTRAL SCHOOL DISTRICT**  
**6110 State Route 8**  
**Chestertown, NY 12817**

**New Student Registration**  
**Residency Verification Form**

**Student Name(s)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent Name(s)** \_\_\_\_\_  
\_\_\_\_\_

**Primary Residence Address**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you own your home:       Rent:       Other:

If owner, please provide evidence (telephone, utility, tax bill)

If rent/lease, please provide a copy of rental/lease agreement

If other, please provide proof of residency