

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