

You have provided your residency for the sole purpose of enrolling a student(s) into the Meriden Public Schools. As such, you attest that the student(s) reside with you in your Meriden residence. In accordance with Conn. Gen Stat. 10-220(a), this entitles the student to enrollment in the Meriden Public Schools. You have acknowledged the following statement:

"I understand that if I have made a fraudulent statement regarding the student's residency, I may be responsible for the current cost of tuition for that student(s)".

For the 2025-2026 School Year, the per-pupil cost is \$16,646. If the student(s) require special education, this cost will be higher.

I also acknowledge that I have agreed to notify the Meriden Public Schools if, and when, the student(s) no longer reside at my address.

I understand that the Meriden Public Schools retain the right to verify this information with various means available to them.

Student Name _____ DOB: ____ / ____ / ____ School _____

Student Name _____ DOB: ____ / ____ / ____ School _____

Student Name _____ DOB: ____ / ____ / ____ School _____

Printed name of resident

Address

Signature of resident

Date

District Representative Name, printed

District Representative Signature

Date

