

**2024-2025 School Year
Non-Attendee Resident Form
Euclid Residents Only**

To receive transportation or other appropriate services to a community, charter, or private school in the City of Euclid, the Euclid Board of Education requires that the parent or guardian register his or her child if the child is new to the community, charter, or private school, or there is a change in address.

For the 2024-2025 school year, students in grades 1-8 must live **one (1) mile** from the school of attendance.

One packet must be completed for each child. The following items must be submitted:

- Completed and **signed** registration form
- Residency and Custody Affidavit form
- Copy of student's birth certificate
- Copy of a lease or proof of home ownership (mortgage bill or settlement statement)

AND

- Copy of one current piece of business mail (**must be included**)

1. Incomplete packets will not be processed. It is your responsibility to complete and sign all forms and submit **all** of the above documents.
2. If your child was attending one of the Euclid City Schools during the 2023-2024 school year, the student **must be withdrawn** from that Euclid school before the packet will be processed.
3. In order for a child to receive the bus for the first day of school, your school's office must return all of your paperwork to the Euclid Board of Education no later than **July 15, 2024**. After July 15th, **it will take up to five days or longer for your child to be routed.**

This registration packet with all of the above documents
must be returned to your school's office.

Packets **will not be accepted** at the Euclid Board of Education.

Your school's office will forward your packet and information to
the Euclid City School District.

Please PRINT clearly and complete all boxes.

Check one of the following: New Registration <input type="checkbox"/> Address Change <input type="checkbox"/>												
Name of Current Charter/Private School 2024-2025 School Year	2024-2025 Grade	Previous School Attended 2023-2024 School Year										
<table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;"><i>Last Name</i></td> <td style="width:33%; border: none;">Student's Name <i>First Name</i></td> <td style="width:33%; border: none;"><i>Middle Name</i></td> </tr> </table>		<i>Last Name</i>	Student's Name <i>First Name</i>	<i>Middle Name</i>	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>							
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<i>House Number</i>	Address <i>Street</i>	<i>Apt. #</i>	<i>Zip Code</i>									
Birth Date <i>(mm/dd/yyyy)</i>	Birth Place (City of Birth Hospital) <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;"><i>City</i></td> <td style="width:33%; border: none;"><i>State</i></td> <td style="width:33%; border: none;"><i>County</i></td> </tr> </table>		<i>City</i>	<i>State</i>	<i>County</i>							
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Native Language English <input type="checkbox"/> Other <input type="checkbox"/> _____	Race/Ethnicity (Check all that apply.) <table style="width:100%; border: none;"> <tr> <td style="width:60%;">African American</td> <td style="width:40%;"><input type="checkbox"/></td> </tr> <tr> <td>American Indian or Alaskan Native</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Asian or Pacific Islander</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Hispanic</td> <td><input type="checkbox"/></td> </tr> <tr> <td>White</td> <td><input type="checkbox"/></td> </tr> </table>		African American	<input type="checkbox"/>	American Indian or Alaskan Native	<input type="checkbox"/>	Asian or Pacific Islander	<input type="checkbox"/>	Hispanic	<input type="checkbox"/>	White	<input type="checkbox"/>
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Student lives with Parent's/Guardian's Name: _____ Relationship: _____ Parent's/Guardian's Name: _____ Relationship: _____ Parent/Guardian's Signature: _____ Date: _____												
Euclid City School District's Signature:		Date:										



Residency and Custody Affidavit

For the purpose of establishing school residence and custody (to be completed by parent or legal guardian.)

I, _____ certify that I am the custodial parent/legal guardian of

(Print all students' names that are being registered)

and that I have established residency at _____
Street Number, Name, Apt# City State Zip

Property Owner's Name _____ Telephone Number _____

I understand that legal residency is determined by certain conditions, among them are that mail delivery, voting residence, and payroll tax deductions are based on the Euclid City School District address and also, that the residence where meals are taken and where the resident parent sleeps must be this residence.

PLEASE INITIAL AFTER READING EACH STATEMENT.

_____ I/we certify that the information provided in this document and registration packet is true and no information has been withheld, concealed, or misrepresented for the purpose of circumventing the school attendance laws of the State of Ohio in order to enroll named students in the Euclid City School District

_____ I/we understand that I/we are responsible for informing school officials of any change(s) in the residence of any parent, legal guardian, or other responsible adult. If I change my present address to another address that is within the Euclid City School District, I will immediately notify the Registration Department in person with proof of new residency. I further understand that if the above noted address ceases to be my legal residence and my new residence is outside the boundaries of the Euclid City School District, I will withdraw my child(ren) from the district.

_____ I/we have provided the Euclid City School District with an official copy of any and all current court orders from the Domestic Relations, Juvenile, Probate or any other court which has exercised jurisdiction over the custody or residency of the child (ren) being enrolled as per Ohio Revised Code 3313.672. I/we are also responsible for informing school officials of any changes to the legal custody or guardianship of the child (ren).

_____ I/we acknowledge the student who is being registered is not currently expelled or excluded from any other school pursuant to O.R.C. Sections 3301.121 and 3313.662.

_____ I/we understand that *if* the student attends school while not being eligible to do so tuition free, the student and all responsible parties will be liable for tuition at a rate set by the Ohio Department of Education according to the Ohio Revised code 3317.08 and the student will immediately be withdrawn from the Euclid City School District. The tuition rate for the 2024-2025 school year is \$589.22 per month per child.

_____ I/we understand that the Euclid City School District may use whatever legal means it has at its disposal to verify my residency. I/we *wave* my rights to confidentiality of information relative to my/our residence. This information will be used to confirm or deny my residence in Euclid, Ohio.

Parent/Guardian's Signature _____ Date _____

Registration Department Signature _____ Date _____