

Section I: To be Completed by Parent/Guardian

I, _____, verify that myself and _____
Parent/Guardian Name Children(s) Full Name(s)

Children(s) Full Name(s)

Reside at the following:

Address: _____

City: _____ State: _____ Zip: _____

This does not apply. I am currently homeless in Sarasota County. *(Skip Section III)*

I understand that it is against the law to receive School Readiness services by providing false information. I certify that the information above is true and complete.

Parent/Guardian Signature Date

Section II: To be Completed by Notary Public

STATE OF FLORIDA, County of _____

Sworn to or affirmed and signed before me this _____ day of _____, 20_____.

Personally Known OR
 Produced Identification
Type of ID Produced: _____



Signature of Notary Public

Notary Seal

My Commission Expires: _____

Section III: To be Completed by Landlord or Property Owner

I, _____, hereby certify that I am the Property Owner/Landlord of the address listed in Section I, and I confirm that the individuals named in Section I are currently residing at this address.

Signature of Landlord/Property Owner Date

Phone Number: _____