## Hamburg Central School District Residency Procedure

Student I	Name:	Registered Address:	
		Number/Street:	
Student ID Number:		Town:	
School: _		Suspected Address:	
		Number/Street:	
Grade: _		Town:	
□ Date: Concerns arise over residency of student (s)  Notes:			
□ Date: Steps to take when in  *Collabora  *Talk with  *Talk with		ith other staff members Company	
		lent (if appropriate)	
*Talk with parents *Home Visit		ents	
*Home visit *Special permission granted fro		ssion granted from Superintendent?	
□ Date:	Date: Folder sent to Pupil Services containing:  *Residency Procedure sheet  (complete and signed by building administrator)  *Documentation of the investigation		
□ Date:	Initial letter sent by Pupil Services		
□ Date: Further investigation based on response to initial letter (Include building if necessary)  Investigation Concludes:		ng if necessary)	
	□ Date:	Date:	
	Student(s) lives in-district	Student(s) does not live in-district	
	Date: Second letter sent by Pupil Services (cc: building administrator)	Date: Second letter sent by Pupil Services (cc: building administrator)	
	□ Date:	□ Date:	
	Process Complete	Process Complete	
Building Administrator Signature Date Folder Sent to Pupil Services			
- B	6	*	
Assistant	Superintendent Signature D	ate Folder was Received	