

**Houston Independent School District
3830 Richmond Avenue
Bureau of Student Transfer and Assignment**

**APPLICATION FOR DETERMINATION OF RESIDENCE OF A MINOR
House Bill 103 Section 21.031**

This application must be submitted on behalf of each person (hereafter called "the applicant") under eighteen (18) years of age who claims a residence in the Houston Independent School District (HISD) separate and apart from the residence of the applicant's parent, guardian or other person having lawful control of the applicant under an order of a court (hereafter called "parent, guardian or court custodian," whether there are one or more.)

| Full Name of Child (Last, First, M.I.) | Sex | Grade | Age | Race | Date of Birth | Name of Last School Attended | Name of Zoned School |
|---|-----|-------|-----|------|---------------|------------------------------|----------------------|
| | | | | | | | |

1. Father of the above child _____
Name Address (City and State) Zip Telephone
 (If deceased, give the date of death _____)

2. Mother of the above child _____
Name Address (City and State) Zip Telephone
 (If deceased, give the date of death _____)

3. Name one other living relative of this child _____
Name Address (City and State) Zip Telephone

4. Name of person(s) with whom the applicant is residing within the Houston Independent School District.

Name Address Zip Telephone

5. Relation of the applicant to the person(s) with whom he/she is residing in the Houston Independent School District. Check one:
 Grandmother Grandfather Brother Sister Other (please specify) _____

6. Will the person(s) with whom the applicant resides within the Houston Independent School District assume parental responsibility for the applicant insofar as the HISD is concerned with respect to all matters when school authorities customarily communicate with the parent, guardian or court custodian of a student within the HISD? These communications include but are not limited to matters relating to illness, medical treatment, truancy, disciplinary problems, grade reporting, educational needs, emergency notification and obtaining permission to attend field trips and other activities of the District.
 Check one: Yes No

7. When and for what reason did the applicant start residing with you in the Houston Independent School District? (Please be brief.)

Date

8. Do the parent(s), guardian or court custodian provide the support of the applicant? Check one: None Some All

9. How long does the applicant intend to reside in the Houston Independent School District? _____

I certify that the above statements are true and correct to the best of my knowledge:

Signature of Applicant (Student)

I hereby agree to assume full and complete parental responsibility for this child.

Signed (Guardian)

Address

Zip

Telephone

DO NOT WRITE BELOW THIS LINE.

Approved Denied

Pending: Parental Consent Form
 Parental Consent Form

Director, Attendance Boundaries and Transfer Department

State of _____

County of _____

Subscribed and sworn before me this _____ day of _____, 20_____.

NOTARY PUBLIC

White Copy-Transfer • Yellow Copy-School • Pink Copy-Parent/Legal Guardian • Goldenrod Copy-Student