



Arizona Department of Education
Arizona Residency Documentation Form

Student _____

School _____

Parent/Legal
Guardian/Student _____
(if over 18 yrs.)

As the Parent/Legal Guardian of the Student, I attest that I am a resident of the State of Arizona and submit in support of this attestation a **copy of the following document** that displays my name and residential address or physical description of the property where the student resides:

- Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- Valid U.S. passport
- Real estate deed or mortgage documents
- Property tax bill
- Residential lease or rental agreement
- Water, electric, gas, cable, or phone bill
- Bank or credit card statement
- W-2 wage statement
- Payroll stub
- Certificate of tribal enrollment or other identification issued by a recognized Native American tribe that contains an Arizona address.
- Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
- I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

Signature of Parent/Legal Guardian/Student (if over 18 yrs.)

Date

Guidelines to Determine Eligible Students

The Arizona Department of Education provides the following FY 2018 Income Guidelines for determining eligibility information for federal funding associated with programs funded under the Elementary and Secondary Education Act (ESEA).

Is your family at or below the current income guidelines based on the attached ESEA Eligibility Guidelines schedule?

Indicator 1 Indicator 2 No

Definition of Income: all items such as wages and salaries before any deductions, and other income, such as self employment, welfare, social security, retirement benefits unemployment compensation, workers compensation, Aid for Dependent Children, alimony, child support, pensions, insurance or annuity payments, etc.

If your family qualifies, please complete the following information for each child:

Child's Name	Name of School	Grade

I hereby certify that all of the above information is true and correct.

Parent/Guardian Signature _____ Date: _____

NOTE: These survey forms should be retained by the school or LEA and kept on file for a period of 5 years.

ESEA Eligibility Guidelines Effective from July 1, 2017 to June 30, 2018

Household Size	Indicator 1					Indicator 2				
	Yearly	Monthly	Twice per month	Every 2 weeks	Weekly	Yearly	Monthly	Twice per month	Every 2 weeks	Weekly
1	\$15,678	\$1,307	\$654	\$603	\$302	\$22,311	\$1,860	\$930	\$859	\$430
2	\$21,112	\$1,760	\$880	\$8812	\$406	\$30,044	\$2,504	\$1,252	\$1,156	\$578
3	\$26,546	\$2,213	\$1,107	\$1,021	\$511	\$37,777	\$3,149	\$1,575% %	\$1,435	\$718
4	\$31,590	\$2,633	\$1,317	\$1,215	\$908	\$44,955	\$3,747	\$1,874	\$1,730	\$865
5	\$36,972	\$3,081	\$1,541	\$1,422	\$711	\$52,614	\$4,385	\$2,193	\$2,024	\$1,012
6	\$42,354	\$3,530	\$1,765	\$1,629	\$815	\$60,273	\$5,023	\$2,512	\$2,319	\$1,160
7	\$47,749	\$3,980	\$1,990	\$1,837	\$919	\$67,951	\$5,663	\$2,832	\$2,614	\$1,307
8	\$53,157	\$4,430	\$2,215	\$2,045	\$1,023	\$75,647	\$6,304	\$3,152	\$2,910	\$1,455
For Each Add'l Household Member Add	\$5,408	\$451	\$226	\$208	\$104	\$7,696	\$642	\$321	\$296	\$148