

## RESIDENCY LETTER for PARENT or GUARDIAN of a Student Enrolled in any Private, Parochial, or NYC DOE School; or a Head Start or Early Learn program

Consent section to be completed by Applicant – Please print clearly

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Applicant's Name:	
Student's Name	DOB:/
By signing this form, I consent to the release of I records to IDNYC personnel for IDNYC application will accept this letter only if I also present proof cabove.	NYC Department of Education (DOE) on purposes. I also understand that IDNYC
Applicant's signature:	Date signed:// mm/dd/yyyy
To IDNYC Program:	
I write on behalf of	
According to our agency records, the studen	t resides at the following address:
Street Address:	Apt. #:
City:	Zip Code:
Thank you,	
Signature of Principal, Director, or designee	Print Name and Title
Name and Address of School or Program	
	// Date signed (mm/dd/yyyy)

\*This letter must be submitted at an IDNYC Enrollment Center **no more than 60 days** after the date signed.