MONROE COUNTY BOARD OF EDUCATION

Post Office Box 967, Monroeville, Alabama 36461 (251) 575-2168

So	chool	Date
Who has le	egal custody of child:	
We certify	that our family residence is:	
We curren	tly reside with:	
Name:	Relati	onship:
Our forme	r residence was:	
(Student's	will live with us Name)	at our present address.
(Signature	of Parent or Legal Custodian)	
(Signature	of Homeowner/Lessee)	NOTARY SEAL
(Signature	of Notary)	
(Signature NOTE:	_	custodian. If it is determined that gal custodian or lives out of distric nool.

Superintendent

Date