



# Groveport Madison Schools Transportation Department

4400 Marketing Place, Suite C  
Groveport, OH 43125

**614-836-4788**

## Residency Verification - Rental

**\*\*A copy of your mortgage or lease MUST be submitted with this form\*\***

Residency Verification is part of our enrollment process and **MUST** be completed upon submitting your transportation request forms. The Rental Agent **WILL** be contacted to verify this document.

By signing below, I give Groveport Madison Local Schools my consent to use any legal means to verify my residency. I hereby give my permission for release of information concerning my residency from employers, realtors, rental office, and my utility providers.

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Lease Holder

\_\_\_\_\_  
Signature of Lease Holder

\_\_\_\_\_  
Date

### **Rental Agent Use Only**

As Rental Agent of the above residence, I am aware and give my permission for this family to be living with the Lease Holder at the address listed above.

\_\_\_\_\_  
Printed Name of Rental Agent

\_\_\_\_\_  
Signature of Rental Agent

\_\_\_\_\_  
Date