



2211 Washington Avenue
Oroville, CA 95966
(530) 538-2300 Business
(530) 538-2308 FAX – Dist. Office
(530) 538-2357 FAX – Supt. Office

Superintendent
(530) 538-2300, ext. 1107

Asst. Supt. of Business
(530) 538-2300, ext. 1103

Director of Alternative Education
(530) 538-5350

Educational Services
(530) 538-2300, ext. 1104

Las Plumas High School
2380 Las Plumas Avenue
Oroville, CA 95966
(530) 538-2310
Fax: (530) 534-5974

Oroville High School
1535 Bridge Street
Oroville, CA 95966
(530) 538-2320
Fax: 534-6203

**Prospect High School/
Community Day School**
2060 2nd Street
Oroville, CA 95965
(530) 538-2330
Fax: (530) 538-2338

**Oroville Adult Education
Career & Technical Center**
2750 Mitchell Avenue
Oroville, CA 95966
(530) 538-5350
Fax: (530) 538-5396

Student Residency Form

This form addresses the requirements of the McKinney-Vento Act (Title X, Part C of the NCLB). In the event that the youth is not staying with a parent or guardian, use the caregiver authorization form to address guardianship issues.

Where does the youth stay at night:

Shelter Motel/Hotel Car/vehicle Campsite

other location not maintained for living

temporarily with another family or in another arrangement

Name of Student: _____ DOB: _____

Name of School: _____

I am seeking enrollment at the above named school. Since _____ I/my family have not had a permanent residence. Under penalty of perjury under the laws of this state, I declare that the information provided here is true and correct. If called upon to testify, I would be competent to do so.

Name of person completing form: _____

Signature _____ Date _____

Address: _____

Phone/Contact: _____

