 [](http://www.google.com/url?sa=i&rct=j&q=texas+workforce&source=images&cd=&cad=rja&docid=4KEd1u5frQe_LM&tbnid=1P_aEB5z5-72cM:&ved=0CAUQjRw&url=http://www.timesrecordnews.com/photos/2013/may/11/82681/&ei=TB6mUcaoJoaA9gTykYGABA&bvm=bv.47008514,d.dmQ&psig=AFQjCNF0hyz13EhPSy8FnGNCocBK7E5CWw&ust=1369927592109867)

**Dr. Jesus H. Chavez Ricardo Rivera**

**Interim Superintendent Director**

BISD Adult Continuing Education Consortium for Cameron County

**AFFIDAVIT OF RESIDENCE**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To Whom This May Concern,

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, formally acknowledge that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_is living at the street address of:

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

City, State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have attached the following documents for your consideration:

utility bill (water/light/cable/gas)

home telephone bill

renter’s receipt or contract

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEL#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form 4B

BISD does not discriminate on the basis of race, color, national origin, sex,  religion, age, disability or genetic information in employment or provision of services, programs or activities. BISD no discrimina a base de raza, color, origen nacional, sexo, religión, edad, incapacidad o información genética en el empleo o la disposición de servicios, programas o actividades.

Brownsville Independent School District Adult Continuing Education Department 708 Palm Blvd. Brownsville, Texas 78520 Phone: (956) 548-8175, Fax: (956) 548-7904

 [](http://www.google.com/url?sa=i&rct=j&q=texas+workforce&source=images&cd=&cad=rja&docid=4KEd1u5frQe_LM&tbnid=1P_aEB5z5-72cM:&ved=0CAUQjRw&url=http://www.timesrecordnews.com/photos/2013/may/11/82681/&ei=TB6mUcaoJoaA9gTykYGABA&bvm=bv.47008514,d.dmQ&psig=AFQjCNF0hyz13EhPSy8FnGNCocBK7E5CWw&ust=1369927592109867)

**Dr. Jesus H. Chavez Ricardo Rivera**

**Interim Superintendent Director**

BISD Adult Continuing Education Consortium for Cameron County

**Declaración jurada de residencia**

Fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A quien corresponda,

Yo, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, reconozco formalmente que \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

está viviendo en la dirección de:

Dirección: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estado de la ciudad: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Código postal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adjunto los siguientes documentos para su consideración:

factura de servicios (agua/luz/cable/gas)

factura Telefónica de casa

recibo o contrato de alquiler

Sinceramente,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEL#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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