



**Col. Z. Magruder High School**  
**5939 Muncaster Mill Road**  
**Rockville, Maryland 20855**  
**240-740-5560**

## **CUSTODIAL PARENT AND LEGAL GUARDIAN STATEMENT**

I, \_\_\_\_\_, certify that I am the parent and/or legal guardian  
(printed name)  
of \_\_\_\_\_. In this capacity and as a legal resident of Montgomery  
County, I am seeking to enroll him/her in Montgomery County Public Schools.

We reside at: \_\_\_\_\_  
\_\_\_\_\_

Home telephone number: \_\_\_\_\_

I understand that any attempt to falsify information shall result in withdrawal of my son/daughter from public school and that I am responsible to pay the appropriate tuition charge for the period of time my son/daughter attended public school in Montgomery County avoiding non-resident tuition.

The undersigned does hereby attest to the accuracy of these statements.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

- Photo ID:**  
Driver's License  
Permanent Resident Card  
Passport