

ROSLYN PUBLIC SCHOOLS

DISCLOSURE STATEMENT

(MUST BE NOTARIZED)

NAME OF CHILD/CHILDREN:

(PRINT): _____
(First name) (Last name)

(PRINT): _____
(First name) (Last name)

PARENT NAME (PRINT): _____
(First name) (Last name)

ADDRESS: _____
(Street) (City) (Zip Code)

I understand that in order for my child/children to attend the Roslyn Public Schools, I must be a resident of the Roslyn School District. **I certify that I have actually taken up residency and am domiciled (living) at the above address with my child/children effective _____ (INSERT DATE).**

Section 210.25 of the Penal Law of the State of New York prohibits the making of false written statement. Therefore, I hereby swear/affirm that the statements contained in the student account and enrollment forms are true.

I further understand that if this certification is found to be false, my child/children will be excluded from the Roslyn Public Schools and I may be liable for payment of tuition from their date of enrollment through their date of termination, and may be subject to the penalties for perjury, which is a Class A misdemeanor.

I understand that, in addition to payment of non-resident tuition, the District will seek all costs of collection thereof, including reasonable attorney fees. **I recognize that it is my responsibility to notify the school district if I move.** I attest that all information provided by me on this document is true.

****PLEASE BE AWARE THAT THE DISTRICT MAINTAINS THE RIGHT TO VERIFY RESIDENCY THROUGH THE UTILIZATION OF A HOME VISIT****

Parent's Signature (MUST BE NOTARIZED-SEE BELOW) Date

State of New York)
County of _____)

Sworn to before me this ____ day of _____ 20__

NOTARY PUBLIC