

PARENT'S AFFIDAVIT

STUDENT'S NAME (Print last name, first name)

*This affidavit should be completed by both parents or, where appropriate, by the legal guardian.

STATE OF NEW YORK)

) ss:

COUNTY OF)

_____ (NAME OF PARENT), being duly sworn, deposes and says:

1. I am the parent of the above named Child/Ward who resides at

(ADDRESS OF PERSON IN CUSTODIAL RELATIONSHIP).
2. I reside at _____
(ADDRESS OF PARENT)
3. The reason(s) why the Child/Ward is not living with me are the following:

4. I have asked the custodial parent/guardian named below to assume responsibility for the custody and control of my Child/Ward because:

5. How long do you intend for this living arrangement to continue. (Be Specific)

6. Who will provide the child with food, clothing and all other necessities: _____

7. Who will be responsible for the matters which relate to the Child's/Ward's education. Be specific. (e.g. signing permission slips, course selection sheets, or attending parent conferences):

8. I understand that this statement is being made UNDER THE PENALTIES OF PERJURY, so that my child may be admitted to the schools of the _____ School District as a district resident. I further understand if my child is found not to be a legitimate resident of the District that I WILL BE LEGALLY RESPONSIBLE FOR AND WILL BE BILLED THE SCHOOL DISTRICT'S ANNUAL TUITION RATE OF APPROXIMATELY _____ PER YEAR, PER CHILD, retroactive to the first day of my child's admission. I also realize that theft of governmental services is a crime punishable under the State Penal Law and that a false statement in connection with this application will also subject me to criminal prosecution. I have been informed that the school district may make unannounced home visits for purposes of residency verification.

WHEREFORE, it is respectfully requested that you recognize _____
_____ (NAME OF CUSTODIAN) as the custodian and caretaker of my
Child/Ward and recognize his/her actual and only address to be that of _____
_____ (NAME OF CUSTODIAN) who lives at _____
_____ (ADDRESS OF CUSTODIAN).

Print Name

Print Name

SIGNATURE OF PARENT

SIGNATURE OF PARENT

Sworn to before me this
____ day of _____, 20____

Sworn to before me this
____ day of _____, 20____

Notary Public

Notary Public

ANY FALSE STATEMENT MADE IN THIS APPLICATION IS ALSO PUNISHABLE AS A
CLASS 6A6 MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW.