

CUSTODIAN'S AFFIDAVIT

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

*This affidavit should be completed by all persons in custodial relationship with the child.

STATE OF NEW YORK

) ss:

COUNTY OF

)

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

1. I live at _____
(FULL ADDRESS OF CUSTODIAN).
2. The above named Child/Ward is my _____
(CHILD'S RELATIONSHIP TO CUSTODIAN) and he/she has lived with me since _____ (DATE).
3. The reason(s) why the Child/Ward is living with me and not the parent(s) are as follows:

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

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

6. 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):

7. I understand that this statement is being made UNDER THE PENALTIES OF PERJURY, so that my child/ward may be admitted to the schools of the _____ as a district resident. I further understand if my child/ward is found not to be a legitimate resident of the _____ 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/ward'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 will make unannounced home visits for purposes of residency verification.

WHEREFORE, it is respectfully requested that you recognize me as the custodian and caretaker of the aforementioned 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 CUSTODIAN

SIGNATURE OF CUSTODIAN

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
5A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW.