## RIVERSIDE TOWNSHIP SCHOOL DISTRICT 112 E. WASHINGTON STREET RIVERSIDE, NJ 08075 856-461-1255

## PARENT/LEGAL GUARDIAN CERTIFICATION FOR AN AFFIDAVIT STUDENT

To be completed by the child's parent/legal guardian when the child is or will be residing with an individual who is domiciled in the Riverside Township School District and is <u>not</u> the child's parent/legal guardian (and does not have custody of the child). The Resident Certification for an Affidavit Student must also be completed.

PARENT/LEGAL GUARDIAN:  I,	CHILD/CHILDREN:	DOB:
1. My date of birth is  (Date)  2. My telephone number is  3. My email address is  4. I reside at  (Street Address, Apt. #, City, State, Zip Code)  5. I have resided at the above address since  (Approx. Date)  6. My previous residence is  (Street Address, Apt. #, City, State, Zip Code)  and I lived there from approximately to	PARENT/LEGAL GUARDIAN:	
<ol> <li>My telephone number is</li> <li>My email address is</li> <li>I reside at (Street Address, Apt. #, City, State, Zip Code)</li> <li>I have resided at the above address since (Approx. Date)</li> <li>My previous residence is (Street Address, Apt. #, City, State, Zip Code)</li> <li>and I lived there from approximately to</li> </ol>	I,(Name of Parent/Legal Guardian)	, do swear under oath to the following:
<ul> <li>3. My email address is</li> <li>4. I reside at (Street Address, Apt. #, City, State, Zip Code)</li> <li>5. I have resided at the above address since (Approx. Date)</li> <li>6. My previous residence is (Street Address, Apt. #, City, State, Zip Code)</li> <li>and I lived there from approximately to</li> </ul>	1. My date of birth is	(Date)
4. I reside at(Street Address, Apt. #, City, State, Zip Code)  5. I have resided at the above address since  (Approx. Date)  6. My previous residence is(Street Address, Apt. #, City, State, Zip Code)  and I lived there from approximately to	2. My telephone number is	·
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(Street Address, Apt. #, City, State, Zip Code) and I lived there from approximately to	5. I have resided at the above	
	6. My previous residence is	(Street Address, Apt. #, City, State, Zip Code)
7. I am the (circle one): natural parent legal guardian	and I lived there from app	proximately to
	7. I am the (circle one):	natural parent legal guardian
of (Child's Name)	of	(Child's Nama)

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8.	The child's other (circle one)		natural parent	legal guardian				
	is			and resides at				
	(Name of other Natural Parent/Legal Guardian)							
		(Street A	ddress, Apt. #, City, State,	Zip Code)				
9.	The fo	ollowing individuals hav						
		(Name)	(Address)	(Relationship to Child)				
		(Name)	(Address)	(Relationship to Child)				
	(C	ontinue on back of page	if needed)					
10.	The cl	nild does not reside with	me at my home.					
11.	In add	ition, the child does not	reside with his/her oth	ner natural parent/legal guardian.				
12. I am not capable of supporting or providing care for the child due to the following family or economic hardships:								
13.		ttaching documentation paragraph.	to support the validity	of the statements made in the				
14. The child resides with , who lives at								
(Name of Riverside Township School District Resident)								
		(Stre	et Address, Apt. #, City, S	tate, Zip Code)				
a. This individual has resided within the Riverside Township School Distric the above-listed address since								
				(Approx. Date)				
	b.	The child has resided v	with this individual sin	(Approx. Date)				
				(Approx. Date)				
	c.	The child previously re	esided at(Street Add	ress, Apt. #, City, State, Zip Code)				
		from to						
		110III 10 _	and reside	u widi				

	(Date) (Date)			(Names)
d.	The above-listed individual (circle one) child by blood or marriage. The individual			
	follows:			
e.	The child is or will be (1) sleeping at the ab (2) leaving from that residence in the morn residence from school in the afternoon on a	ing, <u>a</u>	<u>nd</u> (3) retu	rning to that
f.	The individual supports the child gratis (wi reimbursement from me or any relative) as own child. I agree to supply the Riverside relevant information and documentation to	if the Town	child were ship School	e the individual's ol District with all
g.	The individual will support the child gratui school year ending in June	tously	for longe	r than the current
h.	The individual has assumed all personal obschool requirements.	ligatio	ons for the	child relative to
i.	I affirm that the child is not residing with the of receiving a free public education in the I			

- 15. When the child no longer resides with the individual listed in Paragraph 14 or when the child's residence changes, I will immediately notify the Central Registration Office of the Riverside Township School District.
- 16. I will immediately notify the Central Registration Office of the Riverside Township School District of any change in the facts provided in this Affidavit.
- 17. I agree to supply the Riverside Township School District with all relevant information and documentation to support the statements contained in this Affidavit.
- 18. I agree to resubmit this Affidavit annually prior to the beginning of each new school year for review by the Riverside Township School District.
- 19. I affirm that I am not attempting to have the child reside with the individual listed in Paragraph 14 for the sole purpose of receiving a free public education in the Riverside Township School District.
- 20. I understand that it is a violation of <u>N.J.S.A.</u> 18A:38-1(c) for a person to fraudulently allow a child of another person to use his residence and who is not the primary financial supporter of that child. A person also violates <u>N.J.S.A.</u>

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18A:38-1(c) when he fraudulently claims to have given up custody of his child to a person in another school district.

- 21. I understand the residency requirements of the Riverside Township School District and I acknowledge that the initial determination of eligibility is subject to a more thorough review. Should a residency investigation find that I have registered my child under false pretenses, I will be held liable for tuition and my child will be removed from the rolls.
- 22. I affirm that the information provided and the statements made in this Affidavit are true. 23. I have read all of the above statements and fully agree to the terms. (Signature of Parent/Legal Guardian) (Date) (Printed Name of Parent/Legal Guardian) **NOTARY** Sworn to and subscribed day of , 20

this

(Month)

(Notary Signature)