## MAMARONECK UNION FREE SCHOOL DISTRICT 1000 West Boston Post Road, Mamaroneck, NY 10543 PRE-ADMITTANCE APPLICATION NON-RESIDENT/TUITION-PAYING STUDENT

Office Use Only Received	
Approved	_

Check One:	Tuition:	Care/Custody:	Foreign Student:	Staff Child:			
Name of Child:							
Date of Birth:				<del></del>			
Place of Birth:							
Name of person and							
address where child							
will live:							
Relationship to child:							
Telephone Number:							
E-Mail Address:							
State the grade level, aca		district school you wis			•		
=:	School		Academic Year	Grad	le		
First Choice	_						
Second Choice							
·	ogram needs and	d/or required services	(Section cannot be left bla	ank - Write n	one, if		
applicable:							
Former addresses where	child has lived St	treet/City/State/Zip					
ebbb.	and District C	N. 101 - 1 - 17' -			6		
Former schools child atte	naea - District/C	lity/State/Zip		Year	Grade		
Parent(s)' authorization for Mamaroneck UFSD to obtain student's records from above named schools:							
CICNATURE OF MATERNAL	DARENT/CHARRI		NATURE OF RATERNAL RAPEN				
SIGNATURE OF MATERNAL	PARENT/GUARDIA	AN SIGI	NATURE OF PATERNAL PAREN	11/GUARDIAN	V		
PRINT NAME		PRI	NT NAME				
Information regarding ch	ild's father:	Living		Deceased			
Name:							
Address:							
Telephone Number:							
E-Mail Address:							
Occupation:							
Place of Employment:							

Information regarding child's mother:	Living	Deceased			
Name:					
Address:					
Telephone Number:  E-Mail Address:					
Occupation:					
Place of Employment:					
Do the shild's perents our real property in th	a school district. Vos /N	la .			
Do the child's parents own real property in the If yes, please provide address:	ie school district. Tes/i	NO .			
Does either parent maintain another residen	ce elsewhere? Yes/No				
If yes, please provide address:	,				
THREE QUESTIONS BELO	OW COMPLETED FOR C	ARE/CUSTODY ONLY			
To what extent will the care, custody and cor	ntrol of the child be exe	rcised by guardian:			
What court orders have been made in respect to the child's guardianship or custody?					
If the child is residing in a district other than	that of either parent, do	escribe the reason & purpose			
for such an arrangement, including whether I	· ·				
BEL	OW COMPLETED BY AL	L			
State of					
County of					
bein	ig duly sworn, deposes an	d says that deponent is the (relationship to			
child); that the deponent has read the foregoing application and knows the contents thereof; that information in the application is accurate to the best of					
the deponent's knowledge and that deponent has given the answers set forth above knowing that the Mamaroneck					
UFSD will rely upon them in determining whether the child is to be admitted to its school system with or without					
being required to pay tuition; that the deponent has received and read Policy 5152.					
SIGNATURE OF MATERNAL PARENT /GUARDIAI	N SIGNATURE OF PATI	ERNAL PARENT/GUARDIAN			
PRINT NAME	PRINT NAME				
Sworn to before me this day of	20				
Notary Public					