

Pequannock Township Public Schools

538 Newark Pompton Turnpike
Pompton Plain, New Jersey 07444
Phone: (973) 616-6040 ♦ Fax: (973) 616-6043

and, therefore, my child is living with the District resident, _____
_____, for reasons other than to receive a free public education in the Pequannock Township School District (hereinafter referred to as "the District"). I am attaching to this affidavit any and all documentation that supports my claim of hardship.

6. My child is living in the District resident's home identified above and is being supported by the District resident, without any financial contribution from me or anyone else, as if he/she was the District resident's own child.
7. No other person is making any financial contribution for food, clothing or lodging on behalf of my child.
8. The District resident intends to keep and support my child gratuitously for a longer time than merely through the school year.
9. The District resident shall assume all personal obligations of my child relative to school requirements and shall ensure that the child complies with all of the policies, rules and regulations of the District and the laws of the State of New Jersey. In addition, I also assume joint and several liability, along with the District resident signing Residency Affidavit 2b, for any tuition assessed if my child is determined to have been ineligible for tuition-free enrollment in the District during any period of tuition-free enrollment that was allowed by the Pequannock Township Board of Education (hereinafter referred to as "the Board").

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10. I have read the affidavit of the District resident (Residency Affidavit 2b) and hereby declare that the statements contained therein are absolutely true to the best of my knowledge and belief.
11. I agree to submit additional documentation that the District may request in order to support the validity of the statements I have made herein.
12. I am aware that I have an obligation to notify the District immediately if any of the above circumstances change.
13. This Affidavit is submitted for the purpose of inducing the Board to accept my child as a student in the District on a tuition-free basis. I state that the information contained in this Affidavit is true and accurate and acknowledge the Board's reliance upon the truthfulness and accuracy of this information. If any of the statements contained in this Affidavit are willfully false, I am aware that I am subject to the criminal penalties provided by law for perjury and/or false swearing, and will remain subject to all other obligations and/or liabilities which I have assumed elsewhere in this Affidavit. Specifically, I am aware that I will be personally liable for the payment of tuition for the child retroactive for the period of ineligible attendance of the child in the District's schools as well as any related costs and/or fees, including attorney's fees, incurred as a result of such ineligible attendance.

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14. Furthermore, I understand that if I have fraudulently claimed to have given up custody of my child to the District resident, I may be found guilty of a disorderly persons offense under N.J.S.A. 18A:38-1(c).

Signature(s) of Non-Resident Parent(s)

Telephone Number

Sworn and subscribed to before me

this ___ day of _____, 20___

Notary Public

My Commission Expires: _____