



AVON GROVE SCHOOL DISTRICT

Annual Application for Non-Resident Child Living with a Resident Other than the Child's Parent/Guardian

Instructions: Complete and notarize Pages 2-4 of this document. If the nonresident child is living, or will be living, in a household with more than one resident adult who will assume responsibility for the child, all such adult residents must complete, sign and notarize the documents.

Step I:

The following documents constitute an application under Section 1302 of the Pennsylvania Public School Code of 1949, as amended, by an Avon Grove School District ("AGSD") resident to potentially enroll a nonresident child in the AGSD. The notarized application and required attachments, along with all other documentation required for enrollment, including but not limited to proof of age, registration statement and home language survey, must be completed and returned to the Director of Pupil Services, 375 South Jennersville Road, West Grove, PA 19390. If approved, the nonresident child will be enrolled in AGSD. If the application is not approved, the child will have to attend the school district of residence of their parent/guardian.

Upon receiving and reviewing the application, the registration office will determine the accuracy of all information supplied in the application.

Step II:

The Director of Pupil Services completes the Determination Form.

Step III:

AGSD monitors and audits the residency agreement by periodic home visits or other means.

Step IV:

The Application must be submitted each school year that enrollment is requested.

THESE ARE LEGAL DOCUMENTS. YOU MAY ASK TO SEE A COPY OF 24 P.S. 13-1302 PRIOR TO SIGNING AND NOTARIZING THE DOCUMENTS. YOU MAY WISH TO SEEK LEGAL ADVICE IF YOU HAVE QUESTIONS OR DO NOT UNDERSTAND ANY PORTION OF THESE DOCUMENTS.

AVON GROVE SCHOOL DISTRICT

Application for Non-Resident Child Living with a Resident Other than the Parent/Guardian

Name of Person Submitting the Application: _____

Address: _____

Telephone number: _____

E-mail Address: _____

Do you live in the Avon Grove School District? Yes _____ No _____

Are you a resident of the Avon Grove School District? Yes _____ No _____
(If yes, attach two forms of proof of residency (one from each group))

Are you at least 18 years of age? Yes _____ No _____

What is your relationship to the child: _____

Name of Child: _____ Age: _____

Date of Birth: _____ Grade Entering: _____

Name & Address of Last School Attended: _____

Father's Name and Address*: _____

*Optional _____

Mother's Name and Address*:

*Optional

Does the student live with you? Yes _____ No _____

The date the child began or will begin living with you: _____

Length of time the child will reside with you: _____

Will the child reside with you on a full-time basis? _____

Will the child reside elsewhere on weekends and/or during the summer or school breaks?

Yes _____ No _____ If yes, where? _____

Will the child reside with you in order to meet the AGSD residency requirement?

Yes _____ No _____

Do you intend to keep and support the child continuously and not merely through the school year?

Yes _____ No _____

Are you supporting the child gratis, without personal gain or compensation?

Yes _____ No _____

Do you assume all personal obligations related to school requirements for this child, which may include but not be limited to providing required immunizations, uniforms, fees/fines for truancy, attending parent-teacher conferences, and attending meetings/hearings concerning discipline?

Yes _____ No _____

Are you the court appointed legal guardian of the child? Yes _____ No _____
(If yes, attach court documentation)

Through my notarized signature, I/we understand and agree as follows:

1. The information contained in this sworn statement is true and correct.
2. AGSD may require other reasonable information be submitted to confirm this sworn statement and may investigate information presented in this sworn statement, including discussing it with appropriate parties to confirm factual accuracy.
3. A new sworn statement will need to be submitted for each school year in which the child enrolls in the AGSD as a nonresident living with a resident.
4. I/We have a continuing obligation to notify the AGSD, in writing, in the event the information in this sworn statement is no longer correct or accurate.
5. I/We have read Section 1302 of the Public-School Code of 1949, as amended; and understand the provisions of the section.
6. **PER 24 P.S. §13-1302, A PERSON WHO KNOWINGLY PROVIDES FALSE INFORMATION IN THE SWORN STATEMENT FOR THE PURPOSE OF ENROLLING A CHILD IN A SCHOOL DISTRICT FOR WHICH THE CHILD IS NOT ELIGIBLE COMMITS A SUMMARY OFFENSE AND SHALL, UPON CONVICTION FOR SUCH VIOLATION, BE SENTENCED TO PAY A FINE OF NO MORE THAN THREE HUNDRED DOLLARS (\$300) FOR THE BENEFIT OF THE SCHOOL DISTRICT IN WHICH THE PERSON RESIDES OR TO PERFORM UP TO TWO HUNDRED FORTY (240) HOURS OF COMMUNITY SERVICE, OR BOTH. IN ADDITION, THE PERSON SHALL PAY ALL COURT COSTS AND SHALL BE LIABLE TO THE SCHOOL DISTRICT FOR AN AMOUNT EQUAL TO THE COST OF TUITION CALCULATED IN ACCORDANCE WITH SECTION 2561 DURING THE PERIOD OF ENROLLMENT**
7. **PER 18 PA. C.S § 4903. A PERSON WHO MAKES A FALSE STATEMENT UNDER OATH OR EQUIVALENT AFFIRMATION, OR SWEARS OR AFFIRMS THE TRUTH OF SUCH A STATEMENT PREVIOUSLY MADE, WHEN HE DOES NOT BELIEVE THE STATEMENT TO BE TRUE IS GUILTY OF A MISDEMEANOR.**

OF THE SECOND DEGREE IF: (1) THE FALSIFICATION OCCURS IN AN OFFICIAL PROCEEDING; OR (2) THE FALSIFICATION IS INTENDED TOMISLEAD A PUBLIC SERVANT IN PERFORMING HIS OFFICIAL FUNCTION. (B) OTHER FALSE SWEARING. -- A PERSON WHO MAKES A FALSE STATEMENTUNDER OATH OR EQUIVALENT AFFIRMATION, OR SWEARS OR AFFIRMS THE TRUTH OF SUCH A STATEMENT PREVIOUSLY MADE, WHEN HE DOES NOT BELIEVE THE STATEMENT TO BE TRUE, IS GUILTY OF A MISDEMEANOR OF THE THIRD DEGREE, IF THE STATEMENT IS ONE WHICH IS REQUIRED BY LAW TO BE SWORN OR AFFIRMED BEFORE A NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS.

Resident Signature _____ Date _____

Resident Name _____

TO BE COMPLETED BY NOTARY

Sworn and subscribed to be on this _____ day of _____

Notary Public:

Resident Signature _____ **Date** _____

Resident Name _____

TO BE COMPLETED BY NOTARY

Sworn and subscribed to be on this _ _____ day of _____

Notary Public:

Copies: File

Administrative Use Only

Preliminary Review:

____ Not approved

____ Approve

Director of Pupil Services _____ **Date** _____