



PELHAM PUBLIC SCHOOLS
629 Fifth Ave.
Pelham, New York 10803
Phone: 914-738-3434, ext. 8

**AFFIDAVIT OF THIRD PARTY IN SUPPORT OF THE ADMISSION
APPLICATION TO PELHAM PUBLIC SCHOOLS**

STATE OF NEW YORK

ss.:

COUNTY OF WESTCHESTER

_____ being duly sworn, deposes and says:
(Name)

I, _____, residing at _____
(Name) (Address)

hereby submit this residency affidavit to the PELHAM UNION FREE SCHOOL DISTRICT to
personally verify that

(Name[s] of Parent[s]/Guardian[s])

and their child(ren): _____
(Name[s] of child[ren])

reside at: _____
(Address)

They have resided at this address since _____.

I am personally familiar with their current residency because _____
(Explanation of how you are aware of where they live)

Deponent has read the foregoing affidavit and knows the contents thereof; that the same are true to the deponent's own knowledge and that deponent has given answers set forth above knowing that The Pelham Public School District, Pelham, New York, will rely upon them in determining whether the child is to be admitted to its school system without being required to pay tuition.

(Print Name)

(Signature)

Sworn to before me this ___ day of _____, 20__

NOTARY PUBLIC

Under PENALTIES OF PERJURY, the statements in this application are true. I understand that the statements in this application are subject to verification by the Pelham Union Free School District and that false statements could subject me to transportation and/or tuition charges where applicable. I also understand that it is my responsibility to notify the school of any changes or circumstances affecting this application. ANY FALSE STATEMENT MADE IN THIS APPLICATION IS ALSO PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW.