

GAHANNA-JEFFERSON PUBLIC SCHOOLS
Affidavit for Families Residing with Friends or Relatives

Note: This form is good for the current school year only. You must complete a new form for each school year that you continue to live in the Gahanna-Jefferson Public School District with friends or relatives.

- Part I: To be completed and signed by the parent/guardian and Notary Public.**
Part II: To be completed and signed by the owner of the home (as applicable).
Part III: To be completed and signed by the Landlord/Rental Agent (as applicable).

The completed and notarized form must be return to the Welcome Center at Clark Hall:
380 Granville Street, Suite A, Gahanna OH 43230 | 614-643-8300 | gjpswelcomecenter@gjps.org

STATE OF OHIO
COUNTY OF FRANKLIN, SS:

I, _____, hereby certify that I have **established residency on a seven-day-a-week basis** in the Gahanna-Jefferson Public School District and am not maintaining a separate residence elsewhere. I am aware that the Gahanna-Jefferson Public School District may use any legal means necessary including, but not limited to, conducting unscheduled home visits to verify that I am living at the address listed below.

I further certify that this residence is located at:

Street Address

Principal Owner of Residence or Lessee

City and Zip Code

My Relationship to Owner of Residence or Lessee

Phone Number

Make, model, and license plate of parent/guardian primary vehicle(s):

Vehicle #1 _____

Vehicle #2 _____

I realize that should any of the above statements be false, I am liable under the Criminal Code for any penalties that the law provides. **Should any of this information be false, I agree to pay the current tuition cost of \$61.30 per day** for the student(s) listed below to cover the period during which they illegally attended the Gahanna-Jefferson Public School District. **I understand if I move out of the Gahanna-Jefferson Public School District, I will immediately notify the District Representative at the Welcome Center at Clark Hall, and I will withdraw my student(s).** _____: Parent/Guardian Initials

Student Name(s)	Grade	School of Attendance

NOTE FOR PARENTS/GUARDIANS OF ATHLETES:
I understand that the Gahanna-Jefferson Public School District's athletic teams will be forced to **forfeit** games when ineligible players who have enrolled under false pretenses are participating on the team.

Please attach to this form **proof of ownership** (mortgage statement, printout from County Auditor's website, tax statement, deed) and a **current electric, gas, or monthly water bill** as proof of residency of the homeowner. Also, please attach a postmarked envelope that has been sent to you at the above-listed address.

Parent/Guardian Signature

Home Phone

Work Phone

Sworn to before me and signed in my presence this _____ day of _____, 20____.

Notary Public

Part II: To be completed and signed by the owner of the home (as applicable)

STATE OF OHIO
COUNTY OF FRANKLIN, SS:

I, _____, hereby certify that I am the owner of the house/condo located at:

Street Address

City

I, _____, further certify that the following persons actually reside at this property, and to the best of my knowledge, are not maintaining a separate residence elsewhere. I realize that should any of my statements be false, I may be liable for any penalties that the law provides under the Criminal Code.

Parent/Guardian Name(s)	Student Name(s)

I am aware that the Gahanna-Jefferson Public School District may use legal means to verify my residency including, but not limited to, conducting unscheduled home visits. I agree to allow the release of housing information and utility customer information to a representative of the Gahanna-Jefferson Public School District.

Signature of Owner of Residence

Printed Name of Owner of Residence

Phone Number

Sworn to before me and signed in my presence this _____ day of _____, 20____.

Notary Public

*****WARNING*****

The current yearly tuition rate for the 23-24 school year for the Gahanna-Jefferson Public School District is:
\$____ (\$____ per day)

The knowingly making of a false statement on this form for the purpose of enrolling a child without tuition is a criminal offense as indicated below, and may be **punishable as a felony** according to the amount of tuition owed.:

O.R.C. 2913.02 Theft by Deception
O.R.C. 2913.13 Falsification

Part III: To be completed and signed by Landlord/Rental Agent (as applicable)

Statement of Occupancy

The parent/guardian is to have this form completed by the Landlord/Rental Agent as verification that the parent/guardian is living at the address provided as their residence. Upon completion, the parent/guardian will submit this form to The Welcome Center at Clark Hall along with a copy of the original signed lease which **lists the parent/guardian as occupant(s)**. Also required is a postmarked envelope that has been sent to the parent/guardian at the above-listed address.

I _____, am the **Landlord/Rental Agent** of the dwelling/apartment located at

(Street Address)

(City)

The following persons **reside at this property**, are **listed as occupants on the lease**, and to the best of my knowledge, are not maintaining a separate residence elsewhere:

Parent/Guardian and Child(ren) Names (please list all):

Signature of **Landlord/Rental Agent**

Signature of **Parent/Guardian**

Printed Name of **Landlord/Rental Agent**

Printed Name of **Parent/Guardian**

Address of **Landlord/Rental Office**

Previous Address of Parent/Guardian

Phone Number of **Landlord/Rental Office**

Phone Number of Parent/Guardian

Date

Date

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\$_____ (\$_____ per day)

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O.R.C. 2913.02 Theft by Deception

O.R.C. 2913.13 Falsification

R.C. 3313.64(B)(1)

Board Policy 5111

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