

Oakland Public Schools

315 Ramapo Valley Road
Oakland, New Jersey 07436
Phone: (201) 337-6156

Residency Affidavit 2a Affidavit Pupils (Parent/Guardian) – N.J.S.A. 18A:38-1(b)

State of New Jersey)
) ss:
County of Bergen)

I, _____, of full age, being duly sworn according to law, on my oath depose and say:

1. I am the parent/guardian of a child by the name of _____.
2. I am domiciled and reside at _____. This has been my place of domicile and residence since _____.
3. My child is living with _____ (“the District Resident”), who resides at _____, which is within the geographic boundaries of the Oakland Public School District.
4. My child is living with the District Resident for reasons other than to receive a free public education in the District, because I am not capable of either: (a) supporting my child, or (b) providing care for my child, due to either: (a) family hardship or (b) economic hardship, as detailed more fully below: _____

5. I am attaching to this affidavit any and all documentation that supports my claim of hardship. Such documentation may include, but is not limited to, court orders, State agency agreements and other evidence of court or agency placements or directives, medical reports, counselor or social worker assessments, employment documents, benefit statements, and other evidence of circumstances demonstrating, where applicable, family or economic hardship. I agree to submit additional documentation that the District may request in order to support the validity of the statements I have made herein.
6. My child is living in the District Resident’s home identified above and is being supported by the District Resident, without any remuneration from me or anyone else, as if he or she was the District Resident’s own child.
7. The District Resident intends to keep and support my child gratuitously for a longer time than merely through the school year.
8. The District Resident has agreed to assume all personal obligations of my child relative to school requirements and to 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.

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9. 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.
10. I am aware that I have an obligation to notify the District immediately, and *will* notify the District immediately, if any of the above circumstances change.
11. I assume joint and several liability, along with the District Resident signing Residency Affidavit 2b, for any tuition that the District may assess if it is determined that my child is or was ineligible for tuition-free enrollment in the District during any period that he or she was allowed to attend schools on a tuition-free basis.
12. 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 attorneys' fees, incurred as a result of such ineligible attendance.
13. 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: _____

Sworn and subscribed to before me
this _____ day of _____, 20____
Notary Public of _____
My Commission expires ____/____/____