



Matawan-Aberdeen Regional School District Office of the Superintendent

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*Superintendent of
Schools*

Lindsey Case
*School Business
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*Assistant Superintendent
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Dr. Elford Rawls-Dill
*Director of
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APPLICATION FOR ADMISSION OF DOMICILE STUDENT

Resident Name: _____
(Resident: name of person who owns/leases property)

This notarized document serves as notification to the Matawan-Aberdeen Board of Education that

(list of all domicile family members living with resident)

Reside in my home, located at: _____
(please print full address)

As such, I am providing proofs of address as follows:

Resident Family- four (4) proofs of residency as noted below:

- Mortgage Statement/Deed, and/or Current Lease
- Three (3) additional acceptable proofs of residence as noted below
 - a. Utility Bills (Gas, Water, Electric).
 - b. Tax Bill, telephone bill, bank statement, cable bill , medical bill, insurance bill, correspondence from the county or special services.

Domicile Family – two (2) proofs of residency as noted below:

- Bank statement, medical statement or invoice, medical reports, benefit reports, or state/county reports
- Driver’s license (with current address), pay stub, car insurance bill
- other

This application is submitted for the purpose of inducing the Matawan-Aberdeen Regional School District Board of Education to accept or continue to enroll the above mentioned students on a tuition free basis. I state that the information contained on this application is true and accurate and knowledge that the Matawan-Aberdeen Regional School District will rely 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 the law for perjury and/or false swearing, and I will remain subject to all other obligations and/or liabilities imposed bylaw. Investigation and random visits by the District Attendance Officer should be expected.

Student’s Name: _____

School: _____ (Notary Seal/Signature/Date Here)

Resident Phone # _____

Parent/ Guardian Phone # _____

(resident signature)

(parent/guardian signature)