

FORM OF INDIVIDUAL ACKNOWLEDGEMENT

Commonwealth of Pennsylvania

County of MERCER

On this, _____ (day) of _____ (month), 20____ (year), before me
_____, the undersigned officer, personally
appeared _____, known to me (or satisfactorily
proven) to be the person whose name subscribed to the within instrument, and acknowledged
that he/she executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

Notary Public

Parent Signature

Guardian assuming responsibility

PENNSYLVANIA ASSOCIATION OF NOTARIES

PAN-1 (04/02)

14 Wood Street * Pittsburgh, PA 15222-1928 * Phone: 412-281-0678 * Fax: 412-281-0321 * Website: www.notary.org * E-mail: pan@ermunro.com

An Equal Rights and Opportunities School District

Lakeview School District
2482 Mercer Street
Stoneboro, PA 16153
Phone: 724-376-7911
Fax: 724-376-7910

**Attachment B-SWORN STATEMENT BY RESIDENT UNDER §13-1302
TO BE COMPLETED BY RESIDENT ONLY**

This is a legal document. You may ask to see a copy of 24 P.S. §13-1302 prior to signing this document, and consult with an attorney if you have any questions or do not understand any portion of this document.

1. Your name: _____
Home Address: _____
Home and/or Cell Number: _____ Work Number: _____
2. Do you live in the school district and does the child live with you? Yes _____ No _____
3. Child's Full Name: _____
Birth Date: _____ Grade: _____
Name and Address of Last School Attended: _____

4. Date child began/will begin to reside in your home. _____
5. Are you supporting this child gratis (without personal compensation or gain)?
Yes _____ No _____
6. Will you assume all personal obligations related to school requirements for this child that may include providing for required immunizations, uniforms, fees/fines, citations/fines for truancy, attending parent-teacher conferences or attending meetings/hearings concerning discipline?
Yes _____ No _____
7. Do you intent to keep and support the child continuously and not merely through the school term? Yes _____ No _____

Through my notarized signature, I/we understand that the school district, pursuant to guidelines issued by the Department of Education and their own written policy, may require other reasonable information to be submitted to confirm this sworn statement.

Signed by resident(s) and notarized _____

Per 24 P.S. §13-1302, a person who knowingly provides false information in the above 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 §2561 during the period of enrollment.