



# Pequannock Township School District

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Dr. Michael Portas, Superintendent of Schools

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## AFFIDAVIT OF DISTRICT RESIDENT PROVIDING HOUSING TO CHILD(REN) OF NON-RESIDENT PARENT(S)

This is a **legal document** made in compliance with provisions of N.J.S.A. 18A:38-1 and is submitted for the purpose of inducing the Pequannock Township Board of Education to permit the child(ren) to obtain a free education in the public schools of Pequannock Township School District. I agree to provide documentation required by the Pequannock Township School District to prove my residency in Pequannock Township.

All questions/information must be completed.

Name of district resident: \_\_\_\_\_

Address: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Email addresses: \_\_\_\_\_

Child(ren) residing with district resident: \_\_\_\_\_

\_\_\_\_\_

My relationship to the above named child(ren): \_\_\_\_\_

The above child(ren) currently reside at my home \_\_\_\_ TEMPORARILY or \_\_\_\_ PERMANENTLY

When did they move into the residence? \_\_\_\_\_

How long will they reside with you? \_\_\_\_\_

Does the District resident \_\_\_\_ own or \_\_\_\_ rent

Proof of residency for the district resident must be provided. If the district resident rents the residence, please provide a current lease or landlord form.

The circumstances that transpired causing the children to live with me are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INITIAL EACH STATEMENT BELOW ATTESTING THAT YOU HAVE READ AND UNDERSTAND.

\_\_\_\_\_ I (we) certify that the above named child(ren) are residing with me, as a resident of Pequannock Township, not solely for the purpose of using my address to receive a free public education in Pequannock Township School District.

\_\_\_\_\_ I (we) certify that the child(ren) are being supported by me (us) gratis as if he/she were my own child(ren). This support includes any expenses in any way connected with the support, maintenance and education of the child(ren) listed above. The parent(s) are not supporting the child(ren) in any way.

\_\_\_\_\_ I (we) intend to keep and support the child(ren) gratuitously for a longer period of time than the school year, as if the child(ren) were my own child(ren).

\_\_\_\_\_ I (we) will notify Pequannock Township School District if the child(ren) move from this residence or if any circumstances change.

\_\_\_\_\_ I (we) certify that the information contained in this affidavit is true, accurate and complete. I am (we are) aware that if any information contained in this affidavit is willfully false, I am (we are) subject to criminal and/or civil penalties provided by the law. I (we) will be liable for the payment of tuition for the child(ren) retroactive for the period of ineligible attendance of the child(ren) in the district.

DO NOT SIGN UNTIL IN PRESENCE OF NOTARY.

Resident signature: \_\_\_\_\_ Date: \_\_\_\_\_

Resident signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public signature

My commission expires: \_\_\_\_\_