SPRING-FORD AREA SCHOOL DISTRICT

DISTRICT ADMINISTRATION OFFICE

857 SOUTH LEWIS ROAD, ROYERSFORD, PA 19468

RESIDENCY AFFIDAVIT

Needs to be completed only if the parent/guardian's name does NOT appear on the deed/settlement papers or lease agreement.

I/We attest that all information provided here is correct and current. I/We understand that if residency should change, for any reason, it is the responsibility of the resident to notify the school district and amend the Residency Affidavit. Any false statements can and will be punishable by law.

I/We, _____, currently reside at
(Resident's Name)

Address: _____

Telephone Number: _____

HOMEOWNER'S VERIFICATION

Homeowner's name _____ Telephone number _____

Approval has been granted for _____ to reside with
(Child's Name)

_____, at the address listed above.
(Parent/Guardian's Name)

Homeowner's Signature _____Date _____

LANDLORD'S VERIFICATION

Landlord's name _____ Telephone number _____

Approval has been granted for _____ to reside with
(Child's Name)

_____, at the address listed above.
(Parent/Guardian's Name)

Landlord's Signature _____ Date _____

(Continued on following page)

Through my/our notarized signature, I/we grant the Spring-Ford Area School District permission to investigate the above information that I/we have presented in this affidavit for confirmation and factual accuracy.

Notwithstanding any other provision of law to the contrary, a person who knowingly provides false information in the sworn 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 section 2561 during the period of enrollment

_____ _____

Signature Signature

_____ _____

Please Print Name Please Print Name

State of _____

County of _____

On this _____ day of _____, 20____, before me personally appeared _____, known to me (or satisfactorily proven to be) the person(s) whose name(s) is/are subscribed to the within affidavit and who acknowledged that he/she/they executed the same for the purposed contained within.

Sworn and Subscribed to

Before me this _____ day

Of _____

_____

Notary Public

My Commission Expires: _____