

321 Village Road East West Windsor, New Jersey 08550 Phone: (609) 716-5000

AFFIDAVIT OF DISTRICT RESIDENT

<u>A</u> F	FIDAVIT –		DO NOT RESIDE IN TH	ESIDENT SUPPORTING A CHILD E WEST WINDSOR-PLAINSBORO
Stı	udent's Name	2		
Stı	udent's Birth	Date		
Ph	one (H)	(W)	Relationship	to student
(D	istrict Reside	nt)	of full age duly sw	orn upon his/her oath, deposes and says:
1.	I reside at t	he above address and su	bmit the following proof	of residence:
		Copy of Executed I	Deed	Copy of Executed Lease
		Other		Affidavit of Title
		Signed Settlement S	Statement	(See Cover Page for additional information)
	This is my	permanent residence, ar	nd I have lived in it since	(Date).
2.	I am emplo	yed by		and have been so
	employed s	ince	(Date).	
3.	The said stu	ident's father is		(Name) who resides at
			(Last known address). The father's telephone number
	is (H)		(W)	

4.	The said student's mother is (Name) who resides at
	(Last known address).
	The mother's telephone number is (H)(W)
5.	The last school previously attended by the student was in the
	district of
6.	The above named child permanently resides in my home as a member of my family and has so resided since(Date). The reason this child resides in my household rather than with his/her parents is:
7.	The child <u>Does/Does Not</u> visit with his/her parents during the week. (Circle One)
	If yes, how many days per week? Does the child visit her/her parent(s) on weekends? If yes, how many weekends per month? Does the child visit his/her parent(s) over school vacations during the year? If yes, how many days and when?
8.	The child <u>Will/Will Not</u> live with his/her parent(s) over the summer. (Circle One)
	If yes, how many weeks and where?
9.	Do the parents financially contribute in any way towards the child or to you on behalf of the child? YES NO
10.	This Affidavit is made to induce the West Windsor-Plainsboro Board of Education to accept (child's name) as a pupil in the public schools commencing with the school term. I understand that if any of the information provided in this Affidavit is changed, for any reason, it is my responsibility to immediately notify the school district.
11.	I certify that I am supporting this child as if the child were my own, without payment or reimburse- ment from the parents or guardians; that I will assume all personal obligations for the child relative to school requirements; that I intend to keep and support gratuitously the said child on a continuous basis and not merely during the school term; that no person is paying me for the keep of said child, or supplying the child with necessities; and that I am contributing 100% of the support of this child.

To support the validity of the affidavit, I am including relevant documentation. Additional documentation I am submitting consists of:

12. In the event an investigation should disclose that the said child is not entitled by law to attend the West Windsor-Plainsboro Regional Schools free of charge, I understand that the child will be dis-enrolled, and that I will be responsible to pay tuition to the district for any periods of unlawful attendance. Such tuition will be based upon the per pupil cost of education for the portion of the academic year for which the child was unlawfully enrolled.

Any person who fraudulently allows a child of another person to use his/her residence and is not the primary financial supporter of that child and any person who fraudulently claims to have given up custody of his/her child to a person in another district commits a disorderly persons offense. <u>NJSA</u> 18A:38-1(c).

VERIFICATION

I, ______, being of full age, and being duly sworn state that I certify that I have read and understand the foregoing Affidavit, and that the foregoing statements made by me in the Affidavit are true. I am aware that if any of the foregoing statements made be me are willfully false, I am subject to prosecution.

Sworn and Subscribed before me this _____ day of _____, 20____.

Notary Public

District Resident Signature



West Windsor-Plainsboro Regional School District

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AFFIDAVIT OF ORAL LEASE

If you do not have a written lease or deed to prove your residency in the school district, you must submit one of the following alternative proofs of residence.

A certification from your landlord, in the following form, that you have an oral lease:

Ι,	certify that		
I, (Name of individual/landlord/or individual agent)	(Parent's Name)		
resides at(Resident Address)			
under an oral lease providing for the payment of mon	thly rent to me in the amount of \$		
I further certify that the above property is own	ned (check one):		
By	, for whom I am the authorized agent.		
I certify that the foregoing statements made b false, I am subject to legal action.	y me are true. I am aware that if any of them are willfully		
	Landlord or Agent		

VERIFICATION

I, _____, being of full age, and being duly sworn state that I certify that I have read and understand the foregoing Affidavit, and that the foregoing statements made by me in the Affidavit are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to prosecution.

Sworn and Subscribed before me this _____ day of _____, 20 ____.

Notary Public

District Resident Signature



321 Village Road East West Windsor, New Jersey 08550 Phone: (609) 716-5000

AFFIDAVIT OF NON-RESIDENT PARENT

<u>AFFIDAVIT</u> – TO BE COMPLETED BY THE NON-RESIDENT PARENT OR GUARDIAN OF A CHILD WHO RESIDES IN THE WEST WINDSOR-PLAINSBORO REGIONAL SCHOOL DISTRICT WITH A DISTRICT RESIDENT.

Stt	Ident's Birth Date		
Pai	rent or Guardian's Name		
Ad	ldress		
Ph	one (H) (W) R	elationship to Student _	
	of full a	age duly sworn upon his	s/her oath deposes and says:
1.	I reside at the above address and submit the follo Copy of Executed Deed		e: by of Executed Lease
	Signed Settlement Statement	Aff	idavit of Title
	Other	(See Cover Page fo	or additional information)
	This is my permanent residence, and I have lived	l in it since	(Date).
	My phone number is (W)	(H)	·
2.	I am employed by		and have been so
	employed since ((Date).	
	The above cited child does not reside in my home		mily and has not so resided n my household is:

4.	The child Does/Does Not visit with me during the week.
	(Circle One)

	If yes, how many days per week? Does the child visit you on weekends? YES NO If yes, how many weekends per month? Does the child visit you over school vacations during the year? YES NO			
5.	If yes, how many days and when? The child <u>Will/Will Not</u> live with me or his other parent over the summer.			
	(Circle One) If yes, how many weeks and where?			
6.	The said child's other parent is (Name) who resides at (Last known address).			
	Telephone number (H) (W)			
	Employer			
7.	The district resident who shall support said child is (Name) who resides at (Last known address).			
8.	The last school previously attended by the said child was			
9.	This affidavit is made to induce the West Windsor-Plainsboro Board of Education to accept the said (Child's name) as a pupil in the public schools commencing with the school term. I understand that if any of the information provided in this affidavit is changed, for any reason, it is my responsibility to immediately notify the school district.			
10.	I certify that I am not supporting this child; that I am not paying for the keep of said child, nor supplying the child with necessities; that I am contributing nothing to support this child. I cannot support the child due to family or economic hardship. (Please explain)			
	To support the validity of this affidavit, I am submitting relevant documentation. The additional documentation I am submitting consists of:			

- 11. I certify that I am not capable of supporting this child or providing care for the child due to family or economic hardship. This child is not residing with __________ solely for the purpose of receiving a free education within the West Windsor-Plainsboro Regional School District.
- 12. In the event an investigation should disclose that my child is not entitled by law to attend the West Windsor-Plainsboro Regional Schools free of charge. I understand that the child will be disenvolued and that I will be held responsible for the cost of tuition to the district for any periods of unlawful attendance. Such tuition will be based upon the per pupil cost of education for the portion of the year in which the child was unlawfully enrolled.

Any person who fraudulently allows a child of another person to use his residence and is not the primary financial supporter of that child and any person who fraudulently claims to have given up custody of his child to a person in another district commits a disorderly persons offense. <u>NJSA</u> 18A:38-1(c).

VERIFICATION

I, _____, being of full age, by way of certification, state that I have read and understand the foregoing Affidavit, and that the foregoing statements made by me in the Affidavit are true.

I agree to provide additional documentation to support this Affidavit if additional information is needed to verify the claim of non-support.

I am aware that if any of the foregoing statements made by me are willfully false, I am subject to prosecution.

Sworn and Subscribed before me this _____ day of _____ 20___.

Parent Signature

Notary Public