

DEPTFORD TOWNSHIP PUBLIC SCHOOLS

Affidavit of Residency & Support of a Minor

SECTION B-1

Pursuant to N.J.S.A. 18A:38-1

Name of Student: _____ Date: _____

Student's Date of Birth: _____ Age: _____

Student's Previous Address: _____ City: _____ Zip _____

Mother: _____ Father: _____

Mother's Address: _____ Father's Address _____

Student's Previous School: _____ Grade: _____

School Assigned: _____ Grade Assigned: _____

I, _____, _____ the property at _____
Property Owner Rent/Own

_____, NJ and swear that I maintain a permanent residence at this address. I further swear that _____
Name of student resides with me, at this address on a permanent basis and that I have assumed all financial responsibilities for this child including school obligations. It is also my intention to keep and support said child for a longer period than merely through the school term.

I have initialed here _____ to acknowledge that I have received a copy of N.J.S.A. 18A:38-1. As per this stature, I have provided the Deptford Township School District with a copy of my proofs of residence and hereby request that the student, _____, *(Name of Student)* be enrolled in this system of public education.

Please list **4 forms of proof** (see Preliminary Information page attached) you provided to demonstrate that you are residing at the address given on page 1 of this application, and that such residence is not solely for the purpose of the student attending school in the district.

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |

I will notify the school official immediately when this student no longer resides at this address on a full time basis. I have read, or had read to me, this Affidavit of Residency, that I have completed, and it is true and correct. **I understand that I can be held legally responsible for any violation of N.J.S.A. 18A:38-1C as a Disorderly Person for fraudulently allowing the use of my residence for education purposes. I also understand that I will be charged tuition for the number of days attended under a fraudulent affidavit.**

Signature of Consenting Adult

Signature of Consenting Adult

Signature indicates that Deptford Township School District has the right to verify residency. By signing this document, the signer affirms all questions have been truthfully answered, and no information has been withheld that might affect the application or the residency requirement. Failure to respond truthfully can result in fines, transfer of student to domicile school and/or other penalties as required by law.

Guardian's Home Phone #: _____ Guardian's Work Phone #: _____

Sworn to and subscribed before me this _____ day of _____, 20_____

Notary Public

DEPTFORD TOWNSHIP PUBLIC SCHOOLS
Affidavit of Relinquishment of a Minor to Guardian(s)
SECTION B-2

Name of Student: _____ Date: _____

Student's Date of Birth: _____

Student's Previous School: _____
School Name / Address

From this date forward, I/we _____
Parent's Name Parent's Name

Relinquish custody of my/our child _____
Student's Name

to: _____ residing at _____
Guardian's Name _____, NJ. _____

I/we will not be financially supporting this child, as the guardian(s) will now assume all financial obligations regarding this child's personal matters. I further understand that I will **NOT** be contacted regarding any educational issue and that all such obligations and decisions will be the concern of the guardian(s).

REASON: _____

This sworn Affidavit of Relinquishment of a Minor to Guardian(s) is to accompany the Affidavit of Support of a Minor as part of the admission process for entry into the Deptford Township School System. Recognizing that these forms are required by N.J.S.A. 18:38-1, I fully understand that I can be charged as a Disorderly Person, according to this statute if I fraudulently claim to give up my child for the purpose of receiving a free public education in the Deptford School District.

PRINT Parent's Name Relinquishing Custody

SIGNATURE of Parent Relinquishing Custody

PRINT Parent's Name Relinquishing Custody

SIGNATURE of Parent Relinquishing Custody

Signature indicates that Deptford Township School District has the right to verify residency. By signing this document, the signer affirms all questions have been truthfully answered, and no information has been withheld that might affect the application or the residency requirement. Failure to respond truthfully can result in fines, transfer of student to domicile school and/or other penalties as required by law.

Home Phone #: _____ Work Phone #: _____

Sworn to and subscribed before me this _____ day of _____, 20_____

Notary Public

I am receiving assistance for this student from _____ County.

DEPTFORD TOWNSHIP PUBLIC SCHOOLS

Registration
Sworn Statement of
LANDLORD
Student with Guardian
SECTION C-B-3

Student Name: _____

School: _____ Date: _____

I, _____, taxpayer of record, own the property located at _____
Taxpayer's Name(s)
_____, NJ. I have owned this property in _____
Address Town
since _____. I am currently renting this property to _____.
Month/Day/Year Renter's Name
To my knowledge, there are _____ children living in this residence.
Number

I have a written lease _____ / I have no written lease _____ with the tenant and according to N.J.S.A. 18A:38-1, I am providing this sworn statement. I have initialed here _____ to acknowledge the fact I have reviewed a copy of N.J.S.A. 18A:38-1 with my tenant. I have read or had read to me this sworn statement, and believe it to be true and correct to the best of my knowledge.

Property Owner's Name(s) PLEASE PRINT

Property Owner's Residence

City State Zip

Property Owner's Telephone Number

Property Owner's Signature Date _____

Sworn to and subscribed before me this _____ day of _____, 20 _____

Notary Public