



# West Deptford Township Public Schools

999 Kings Highway • West Deptford, NJ 08086  
Phone (856) 848-4300 • Fax (856) 848-0897

## SECTION C (RESIDENCY AFFIDAVIT)

To be completed by the PARENT / GUARDIAN living with the district resident

I, \_\_\_\_\_ of full age, being duly sworn according to law, on my oath depose and say:

1. I reside at \_\_\_\_\_  
House/Apt.# Street City State Zip Code

This has been my/our place of residence since \_\_\_\_\_.

2. I **DO NOT OWN/RENT** the premises in which we reside. I and our children are residing in the premises with the approval of the owner/tenant (*reason: financial hardship / due to eviction / by choice etc.*)

**Reason** \_\_\_\_\_

3. I desire to register my child/children in West Deptford School District (hereinafter referred to as the "District"):

<i>Children (First Name, Last Name)</i>	<i>Age</i>	<i>Children (First Name, Last Name)</i>	<i>Age</i>
1 _____	_____	3 _____	_____
2 _____	_____	4 _____	_____

4. I affirm that the individuals listed in **Paragraph 3** are not using the address listed in **Paragraph 1** for the sole purpose of receiving free public education in West Deptford School District.

5. I shall retain all personal obligations of our child/children relative to school requirements and shall ensure that our child/children comply with all of the policies, rules and regulations of the District and the laws of the State of New Jersey.

6. I am aware that I have the obligation to notify West Deptford Board of Education immediately if any of the above circumstances change.

7. I am aware that if any of the statements contained in this Affidavit are willfully false, I am subject to the criminal penalties provided by law for perjury and / or false swearing, and I will be personally liable for the payment of tuition for the child retroactive for the period ineligible attendance of said child in the District's schools as well as any related costs and / or fees, including attorney's fees, incurred as a result of such ineligible attendance.

8. This Affidavit is made in compliance with the provisions of N.J.S.A. 18A:38-1 and is submitted for the purpose of inducing the Board to accept the child as a student in the District on a tuition-free basis. I state that the information contained in this Affidavit is true and accurate and acknowledge the Board's reliance upon the truthfulness and accuracy of this information.

\_\_\_\_\_  
[Printed] Parent's Full Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Sworn and subscribed to before me

this \_\_\_\_\_ day \_\_\_\_\_ of 20 \_\_\_\_\_.

NOTARY PUBLIC

***This document must be signed only in the presence of a Notary Public.***