

BOARD OF EDUCATION

Administrative Procedures

AFFIDAVIT OF RESIDENCY

THIS IS TO CERTIFY THAT:

DATE\_\_\_\_\_

1. I am a bona fide resident of Warren Township.
2. I vote in District #\_\_\_\_\_
3. \_\_\_\_\_  
Name(s) of child(ren)  
  
lives full time with me in Warren Township.
4. I am supporting the child gratis.
5. I will assume all personal obligations for the child relative to school requirements.
6. I intend to keep and support the child gratuitously for a longer time than merely through the school term.
7. \_\_\_\_\_  
Name(s) of child(ren)  
  
will attend the Warren Township Schools only during the period of time that my home is his/her/their legal residence.

THIS IS TO CERTIFY THAT I am the parent (or guardian) of the aforementioned child(ren) and that the above statement concerning this child's residence and support are true.

Name of Parent (or Guardian) \_\_\_\_\_  
(PRINT)

Signature of Parent (or Guardian) \_\_\_\_\_  
(Parent or Guardian)

Address of Parent (or Guardian) \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_