

UPPER ARLINGTON SCHOOLS

SERVE • LEAD • SUCCEED

Residency Affidavit

To be completed by the parent/guardiar
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date

l, _____, being duly sworn, certify that I am the parent/guardian of the following children:

Student Names(s):	School:

My contact phone is:

Home Phone

Cell Phone

Work Phone

I certify that I and the above-named children have established "legal residency" (where the family eats, sleeps, receives their mail and where the parent(s) are registered to vote) on a seven-days-a-week basis at the property located at

Address

P a and <u>are not maintaining a separate residency elsewhere.</u> I am aware that the school district may require additional documentation to verify our residency. I will immediately notify school officials if we change residences. I understand that Upper Arlington City Schools athletic teams will be forced to forfeit games when ineligible players who have enrolled under false pretenses are participating on the team.

l realize that should any of the above statements be false, I am liable for any penalties that the law provides under the criminal code. Further the affiant will be billed (and prosecuted in court, if necessary) to collect all back tuition, which may be due.

Parent/Guardian's Signature	Date
Sworn to before me and signed in my presence this	_ day of, 20
 arent/guardian, please provide any of the following long with this affidavit: Utility/Auto/Insurance bill within the last 30 days Copy of driver's license address update Copy of voter registration at this address Paystub within the last 30 days reflecting this address 	Notary Public