

**SPRINGFIELD PUBLIC SCHOOLS  
SPRINGFIELD, NJ**

Jonathan Dayton High School	Gr. 12	
	Gr. 11	
	Gr. 10	
	Gr. 9	
Florence M. Gaudineer Middle School	Gr. 8	
	Gr. 7	
	Gr. 6	
James Caldwell Elementary School	Gr. 5	
	Gr. 4	
	Gr. 3	
Thelma L. Sandmeier Elementary School	Gr. 5	
	Gr. 4	
	Gr. 3	
Edward V. Walton Early Childhood Center	Gr. 2	
	Gr. 1	
	K	
	Pre-K	

**Registration Forms**

\*Return completed forms directly to school selected above.  
Complete separate forms for each child being registered.

SID (as issued by the State of NJ) \_\_\_\_\_

Child's Name: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Last Name First Name Middle Initial

Address: \_\_\_\_\_

Birth Place: \_\_\_\_\_ Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

NATIVE LANGUAGE OF PARENT/GUARDIAN ENROLLING STUDENT: (If English is **not** the native language, of the person enrolling the student, please check here \_\_\_\_\_)

Telephone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

<b>Full Name of Parent 1: (Required)</b>		<b>Full Name of Parent 2: (Required)</b>	
Birth Date:	Birth Place:	Birth Date:	Birth Place:
Address:		Address:	
Home Phone Number:		Home Phone Number:	
Cell Phone Number:		Cell Phone Number:	
Work Phone Number:		Work Phone Number:	
Occupation:		Occupation:	
Work Address:		Work Address:	
Email:		Email:	

Guardian(s) Name: \_\_\_\_\_ Relationship of Guardian: \_\_\_\_\_

Length of residence with guardian: \_\_\_\_\_ # in home: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Relation to Student: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Telephone #: \_\_\_\_\_ Business Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  
**Doctor's Name:** \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

**Siblings:** M/F Name: \_\_\_\_\_ Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ School Attending: \_\_\_\_\_  
 M/F Name: \_\_\_\_\_ Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ School Attending: \_\_\_\_\_  
 M/F Name: \_\_\_\_\_ Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ School Attending: \_\_\_\_\_

**Full History**

School attended	Address	Phone #	Date of Entry	Grade	Last date attended	Reason for leaving	For Office Use Only Records Received

(Attach document to continue list, if necessary)

For last school attended, state how many days per week: \_\_\_\_\_

Has the student ever been evaluated by the Child Study Team? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Has the student ever had a 504 Plan? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Has the student ever received remedial instruction in Basic Skills? Yes \_\_\_\_\_ No \_\_\_\_\_

**STUDENT REGISTRATION LANGUAGE SURVEY**

New Jersey Administrative Code (N.J.A.C. 6A:15 Bilingual Education) requires prescreening of all students whose native language is other than English to determine which students will be tested with a language proficiency test. The information below will be utilized to develop a list of students to be prescreened.

- Is English your child's native language? \_\_\_\_\_  
 If answer is **NO**, please identify your child's native language \_\_\_\_\_  
**NOTE:** The following optional information will allow the school to better understand the language background of your child.
- What is the **primary** language spoken in your home? \_\_\_\_\_
- List language(s) other than English spoken in your home by family members:  
 \_\_\_\_\_
- Other than English, what language(s) does your child speak and/or understand?  
 \_\_\_\_\_

**While you are not required to identify your racial/ethnic background, the State requires this information from us each fall. We would appreciate your identifying your background by checking the appropriate area(s):**

- \_\_\_\_\_ **WHITE:** Non-Hispanic: A person having origins in any of the original peoples of Europe, No. America, Middle East.
- \_\_\_\_\_ **BLACK:** Non-Hispanic: A person having origins in any of the black groups of Africa.
- \_\_\_\_\_ **HISPANIC:** A person of Mexican, Puerto Rican, Cuban, Central or S. American or other Spanish culture origin regardless of race.
- \_\_\_\_\_ **AMERICAN INDIAN OR ALASKAN NATIVE:** A person having origins in any of the original peoples of N. America.
- \_\_\_\_\_ **ASIAN:** A person having origins in any of the original peoples of the Far East, Southeast, Asia, i.e. China, Japan, Korea, India.
- \_\_\_\_\_ **PACIFIC ISLANDER OR NATIVE HAWAIIAN** A person having origins in the Pacific Islands, i.e. Philippine Islands, Samoa.

\_\_\_\_\_  
Signature - Parent/Guardian

\_\_\_\_\_  
Date

**For Office Use Only**

PROOF OF AGE:

Birth Certificate: \_\_\_\_\_

Other: \_\_\_\_\_

PROOF OF RESIDENCY:

Driver's License # 1 \_\_\_\_\_

# 2 \_\_\_\_\_

# 3 \_\_\_\_\_

# 4 \_\_\_\_\_

PROOF OF IMMUNIZATION:

\_\_\_\_\_

\_\_\_\_\_

**SPRINGFIELD PUBLIC SCHOOLS**

DATE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_  
          M      D      Y

STUDENT: \_\_\_\_\_  
                  Last Name                                  First Name                                  Middle Initial

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_

NAME OF PARENT(S)/GUARDIAN: \_\_\_\_\_  
\_\_\_\_\_

PERSON ENROLLING STUDENT: \_\_\_\_\_

RELATIONSHIP TO STUDENT IF OTHER THAN PARENT: \_\_\_\_\_

STUDENT'S CURRENT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

HOW LONG STUDENT HAS BEEN AT THIS ADDRESS: \_\_\_\_\_

IS STUDENT CURRENTLY IN A TEMPORARY LIVING SITUATION? \_\_\_\_\_

HOW LONG STUDENT IS ANTICIPATED TO REMAIN AT THIS ADDRESS: \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT): \_\_\_\_\_  
\_\_\_\_\_

HOME TELEPHONE (INCLUDE AREA CODE): \_\_\_\_\_

OTHER PHONE OR FAX (IF ANY): \_\_\_\_\_

PARENT(S)/GUARDIAN'S PHYSICAL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT): \_\_\_\_\_  
\_\_\_\_\_

HOME TELEPHONE (INCLUDE AREA CODE): \_\_\_\_\_

OTHER PHONE OR FAX (IF ANY): \_\_\_\_\_

**The school secretary may be in contact with you if clarification or bus transportation is needed.**

**To the Person Enrolling the Student:**

**Please complete the appropriate section A, B, C or D below, according to the situation best matching the student's circumstances.**

Complete **SECTION A (DOMICILE)** if the student is living with a parent or guardian whose permanent home is the address given on page 1 of this application and is located in the district.

**Go to Pages 3 & 4**

**or**

Complete **SECTION B ("AFFIDAVIT" STUDENT)** if the student is living with an adult domiciled in the district, other than the parent or guardian on page 1.

**Go to Pages 5 & 6**

**or**

Complete **SECTION C (TEMPORARY RESIDENT)** if the student is living with a parent or guardian temporarily residing within the district.

**Go to Pages 7 & 8**

**or**

Complete **SECTION D (SPECIAL CIRCUMSTANCES)** if the student's situation is not addressed by Section A, B or C or if any of the circumstances in Section D apply.

**Go to Page 9**

*If you experience difficulties with the enrollment process, please see the school secretary or building principal.*

**SECTION A (DOMICILE)**

*Complete this section if the student is living with a parent or guardian whose permanent home is the address given on page 1 of this application and is located in the district. If you are the student's guardian, or will be the guardian of a student from out of state following expiration of the required 6-month waiting period, you will be asked to provide official papers proving guardianship. You will not be asked to produce "affidavit student" proofs of the type requested in Section B below:*

How long have you lived in this home? \_\_\_\_\_

Do you have any present intention of moving from this home? If so, when and to where?  
\_\_\_\_\_

Do you have residences(s) elsewhere, and, if so, where are they and when do you live there?  
\_\_\_\_\_

Please list four forms of proof (see page 10) you will provide to demonstrate that the address given on page 1 of this application is your permanent home.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

*If the student's parents are domiciled in different districts, regardless of which parent has legal custody, please answer the following questions:*

Is there a court order or written agreement between the parents designating the district for school attendance, and if so, where does it require the student to attend school? (You will be asked to provide a copy of this document.)

\_\_\_\_\_  
\_\_\_\_\_

Does the student reside with one parent for the entire year? If so, with which parent and at what address?

\_\_\_\_\_

If not, for what portion of time does the student reside with each parent and at which addresses?

\_\_\_\_\_

**Continued on next page.**

**SECTION A (DOMICILE) CONTINUED:**

If the student lives with both parents on an equal-time, alternating week/month or other similar basis, with which parent did the student reside on the last school day prior to October 16 preceding the date of this application?

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*Please note: No district is required, as a result of being the district of domicile for school attendance purposes where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent domiciled within the district to the extent required by law.*

If you are claiming to be an emancipated student, you are living independently in your own permanent home in the district? If yes, please describe the proofs you will provide, in addition to those demonstrating domicile, to demonstrate that you are not in the care and custody of a parent or legal guardian.

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*Please note: Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district for domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.*

**END OF SECTION A**

**SECTION B (“AFFIDAVIT” STUDENT)**

*Complete this section if the student is living with a person domiciled in the district, other than the parent or guardian.*

Is the person domiciled in the district, supporting the student without remuneration as if the student were his or her own child, keeping the student for a longer time than the school term and assuming all personal obligations for the student relative to school requirements? Please explain. (You will be asked to file a sworn statement, along with a copy of the person’s lease if a tenant, or a sworn landlord’s statement if a tenant without written lease.)

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Students are not eligible to attend school as “affidavit” students unless the student’s parent or guardian is not capable of supporting or providing care for the student due to family or economic hardship, and unless it is clear that the student is not living in the district solely for purposes of receiving a public education there. Please explain the circumstances applicable in this case, with special attention to the parent/guardian’s family and/or economic hardship. (Both the parent/guardian and the guardian who is a Springfield resident will be required to file a sworn statement with documentation to support the claims made.)

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*Please note: A student will not be considered ineligible because required sworn statement(s) cannot be obtained, so long as evidence is presented that the underlying requirements of the law are being met.*

*A student will not be considered ineligible when evidence is presented that the student has no home or possibility of school attendance other than with a non-parent district resident who is acting as the sole caretaker and supporter of the student.*

*A student will not be considered ineligible solely because a parent or guardian provides gifts or limited contributions, financial or otherwise, toward the welfare of the student, provided that the resident keeping the student receives no payment or other remuneration from the parent or guardian for the student’s actual housing and support. Receipt by the resident of social security or other similar benefits on behalf of the student do not render a student ineligible.*

**Continued on next page.**



**SECTION B (“AFFIDAVIT” STUDENT) CONTINUED:**

*It is not necessary that legal guardianship or custody be obtained before a student will be considered for enrollment on an “affidavit” basis.*

**END OF SECTION B**

**SECTION C (TEMPORARY RESIDENT)**

*Complete this section if the student is living with a parent or guardian temporarily residing within the district, even if the parent has a domicile elsewhere:*

How long have you lived in this residence? \_\_\_\_\_

Do you have a domicile or residences(s) elsewhere, and, if so, where are they and when do you live there?

\_\_\_\_\_  
\_\_\_\_\_

Please list four forms of proof (see page 10) you will provide 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. \_\_\_\_\_

Please note: Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district of domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.

*If the student's parents are domiciled in different districts, regardless of which parent has legal custody, please answer the following questions:*

Is there a court order or written agreement between the parents designating the district for school attendance, and if so, where does it require the student to attend school? (You will be asked to provide a copy of this document.)

\_\_\_\_\_  
\_\_\_\_\_

Does the student reside with one parent for the entire year? If so, with which parent and at what address?

\_\_\_\_\_  
\_\_\_\_\_

If not, for what portion of time does the student reside with each parent and at what addresses?

\_\_\_\_\_

**Continued on next page.**

**SECTION C (TEMPORARY RESIDENT) CONTINUED:**

If the student lives with both parents on an equal-time, alternating week/month or other similar basis, with which parent did the student reside on the last school day prior to October 16 preceding the date of this application? \_\_\_\_\_

**END OF SECTION C**

**SECTION D (SPECIAL CIRCUMSTANCES)**

*Please indicate if any of the following apply:*

- \_\_\_\_\_ The student is the child of a parent or guardian who has moved to another district as the result of being homeless.
- \_\_\_\_\_ The student has been placed in the home of a district resident other than the parent or guardian by court order. (You will be required to provide a copy of the order.)
- \_\_\_\_\_ The student has been placed in the district by the Division of Child Protection and Permanency acting as the student's legal guardian.
- \_\_\_\_\_ The student and parent reside in the home of a Springfield resident. (The parent/guardian and Springfield resident must each complete the appropriate Affidavit of Residency.)
- \_\_\_\_\_ The student is a child of a parent or guardian who previously resided in the district and is a member of the New Jersey National Guard or the United States reserves ordered to active service in time of war or national emergency.
- \_\_\_\_\_ The student is kept in the home of a person domiciled in the district, other than the parent or legal guardian, and the parent/guardian is a member of New Jersey National Guard or the reserve component of the United States armed forces and has been ordered into active military service in the United States armed forces in time of war or national emergency. If this applies, when is the parent or guardian expected to return from active military duty? \_\_\_\_\_
- \_\_\_\_\_ The student resides on federal property? Where? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ The student's circumstances do not appear to be addressed anywhere in this application. I understand that I will be contacted by the school secretary for further information.

**END OF SECTION D**

*If you experience difficulties with the enrollment process, please see the school secretary or building principal.*

## **FORMS OF DOCUMENTATION FOR PROOF OF RESIDENCY**

*The following forms of documentation may demonstrate a student's eligibility for enrollment in the district. Particular documentation necessary to demonstrate eligibility under specific provisions in law will be indicated in the appropriate section of the registration form.*

- Property tax bills, deeds, contracts of sale, leases, mortgages, signed letters from landlords and other evidence of property ownership, tenancy or residency
- Voter registrations, licenses, permits, financial account information, utility bills, delivery receipts, and other evidence of personal attachment to a particular location
- Court orders, State agency agreements and other evidence of court or agency placements or directives
- Receipts, bills, cancelled checks and other evidence of expenditures demonstrating personal attachment to a particular location, or, where applicable, to support of the student
- Medical reports, counselor or social worker assessments, employment documents, benefit statements, and other evidence of circumstances demonstrating, where applicable, family or economic hardship, or temporary residency
- Affidavits, certifications and sworn attestations pertaining to statutory criteria for school attendance, from the parent, legal guardian, person keeping an "affidavit student," adult student, person(s) with whom a family is living, or others as appropriate
- Documents pertaining to military status and assignment
- Any business record or document issued by a governmental entity
- Any other form of documentation relevant to demonstrating entitlement to attend school

The totality of information and documentation you offer will be considered in evaluating an application, and, unless expressly required by law, the student will not be denied enrollment based on your inability to provide certain form(s) of documentation where other acceptable evidence is presented.

You will *not* be asked for any information or document protected from disclosure by law, or pertaining to criteria which are not legitimate based for determining eligibility to attend school. You may voluntarily disclose any document or information you believe will help establish that the student meets the requirements of law for entitlement to attend school in the district, but we may not, directly or indirectly, require or request:

- Income tax returns
- Documentation or information relating to citizenship or immigration/visa status, unless the student holds or is applying for an F-1 visa
- Documentation or information relating to compliance with local housing ordinances or conditions of tenancy
- Social security numbers

*Please be aware that any initial determination of the student's eligibility to attend school in this district is subject to more thorough review and subsequent re-evaluation, and that tuition may be addressed in the event that an initially admitted student is later found ineligible. If your student is found ineligible, now or later, you will be provided the reasons for our decision and instructions on how to appeal.*

**SPRINGFIELD PUBLIC SCHOOLS  
Springfield, New Jersey 07081**

**AFFIDAVIT OF APPLICANT/GUARDIAN  
RESIDENT OF SPRINGFIELD**

**STATE OF NEW JERSEY** :  
: SS  
**COUNTY OF UNION** :

**A F F I D A V I T**

*Note: If applicant is married, this affidavit  
must be signed by both spouses.*

**Sworn Statement for Right of Non-tuition School Attendance**

I/We \_\_\_\_\_ and \_\_\_\_\_ of full age and being duly sworn according to law and under oath say:

1. I/We am/are currently domiciled (maintain a permanent residence) in \_\_\_\_\_ (municipality/borough/township name) at \_\_\_\_\_ (address).
2. I/We am/are supporting gratuitously, as if s/he were my/our child, the child named \_\_\_\_\_. I/we receive no contributions or payment either in money or in food, clothing, recreation, medical expense, lodging, or any other thing or service of value in connection with the support, maintenance and education of the child named above. This gratuitous support of the child named above shall continue throughout the entire calendar year and not merely through the school year or during school days/weeks.
3. I/We will assume all personal obligations for the child named above with respect to school requirements.
4. This affidavit, together with my registration forms and proofs, have been provided specifically to induce the Springfield Board of Education to accept said child as a student who is legally qualified to attend Springfield Public Schools, without payment of tuition.
5. I/We represent that the answers, statements, declarations, and other representations made in this affidavit as well as my registration forms and proofs are absolutely true in all respects and know that the Springfield Board of Education will rely upon same.
6. I/We fully understand and agree that if any significant change occurs regarding the student's current living arrangement, I am obligated to report same to Springfield administration immediately. Significant changes as described herein, include but are not limited to the following: (a) I/We no longer support the student gratis (i.e., a parent has begun contributing to the student's support, education, and/or maintenance); and/or (b) the student sleeps outside of my home and/or at their parent or other relative's home more than one night each week.

7. I/We fully understand and accept that this affidavit shall expire upon the last school day of the school year in which it was executed. I/We further understand and accept that it is my/our obligation to ensure that a new affidavit is completed and submitted to Springfield administration on or before the start of each new school year in which I will seek for the student to remain enrolled in Springfield.

8. I/We fully understand and accept that any false or fraudulent statements, answers or declarations contained in this affidavit, my registration forms, or proofs shall render me/us personally liable to the Springfield Board of Education for full payment of tuition for the school year in which the affidavit is executed. At present that tuition amount is an estimated \$\_\_\_\_\_.

9. I/we fully understand and agree that, if I/we fraudulently allow the child named above to use our residence and I/we am/are not the primary financial supporter of this child, I/we will have committed a disorderly persons offense. If I am convicted of such an offense, I may be fined up to \$1,000.00 and/or be imprisoned for up to six months.

10. I/we fully understand and agree that any false statements, answers, or declarations contained in this affidavit may subject me to criminal prosecution for the crime of false swearing in violation of N.J.S.A. 2C:28-2. If I/we am/are convicted for such a crime, I/we may be punished by a fine of up to \$7,500.00 and/or be imprisoned for up to 18 months.

\_\_\_\_\_  
APPLICANT/GUARDIAN

\_\_\_\_\_  
APPLICANT/GUARDIAN

Sworn and subscribed  
before me on this \_\_\_ day  
of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
A Notary Public of the  
State of New Jersey

My commission expires \_\_\_\_\_

**SPRINGFIELD PUBLIC SCHOOLS  
Springfield, New Jersey 07081**

**AFFIDAVIT OF PARENT/GUARDIAN  
NON-RESIDENT**

**STATE OF NEW JERSEY** :  
: SS  
**COUNTY OF UNION** :

**A F F I D A V I T**

**Sworn Statement for Right of Non-tuition School Attendance**

I \_\_\_\_\_ of full age and being duly sworn according to law and under oath say:

1. I am currently domiciled (maintain a permanent residence) in \_\_\_\_\_ (municipality/borough/township name) at \_\_\_\_\_ (address).
2. However, my child \_\_\_\_\_ is being supported gratuitously by \_\_\_\_\_. I offer \_\_\_\_\_ no contributions or payments either in money or in food, clothing, recreation, medical expense, lodging, or any other thing or service of value in connection with the support, maintenance and education of my child. I expect that this gratuitous support shall continue throughout the entire calendar year and not merely through the school year.
3. This arrangement, whereby my child has come to reside in Springfield with \_\_\_\_\_ gratuitously is due to my experience of the following hardship that has prevented me from being able to support my child myself \_\_\_\_\_.
4. This affidavit, together with my registration forms and proofs, have been provided specifically to induce the Springfield Board of Education to accept my child as a student who is legally qualified to attend Springfield Public Schools, without payment of tuition.
5. I represent that the answers, statements, declarations, and other representations made in this affidavit as well as my registration forms and proofs are absolutely true in all respects and know that the Springfield Board of Education will rely upon same.
6. I fully understand and agree that if any significant change occurs regarding my child's current living arrangement, I am obligated to report same to Springfield administration immediately. Significant changes as described herein, include but are not limited to the following: (a) My child is no longer being supported gratis by a Springfield resident (i.e., I have begun contributing to the costs of my child's support, education, and/or maintenance); (b) my child has returned to reside with me or resides with his/her other parent; or (c) my child has begun to sleep overnight at my home or the home of another (excluding the Springfield guardian) for one or more nights each week.



7. I fully understand and accept that this affidavit shall expire upon the last school day of the school year in which it was executed. I further understand and accept that it is my obligation to ensure that a new affidavit is completed and submitted to Springfield administration on or before the start of each new school year in which I will seek for my child to remain enrolled in Springfield.

8. I fully understand and accept that any false or fraudulent statements, answers or declarations contained in this affidavit, my registration forms, or proofs shall render me personally liable to the Springfield Board of Education for full payment of tuition for the school year in which the affidavit is executed. At present that tuition amount is an estimated \$\_\_\_\_\_.

9. I fully understand and agree that, if I fraudulently caused or allowed my child to pretend to reside in the home of a Springfield resident, a home where I am not the primary financial supporter of, I may be guilty of having committed a disorderly persons offense. If I am convicted of such an offense, I may be fined up to \$1,000.00 and/or be imprisoned for up to six months.

10. I fully understand and agree that any false statements, answers, or declarations contained in this affidavit may subject me to criminal prosecution for the crime of false swearing in violation of N.J.S.A. 2C:28-2. If I am convicted for such a crime, I may be punished by a fine of up to \$7,500.00 and/or be imprisoned for up to 18 months.

\_\_\_\_\_  
NON-RESIDENT PARENT/GUARDIAN

\_\_\_\_\_  
NON-RESIDENT PARENT/GUARDIAN

Sworn and subscribed  
before me on this \_\_\_ day  
of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
A Notary Public of the  
State of New Jersey

My commission expires \_\_\_\_\_

**SPRINGFIELD PUBLIC SCHOOLS**  
**Springfield, New Jersey 07081**

**AFFIDAVIT OF RESIDENCY**  
*(Springfield Resident Home-Provider for Parent and Child)*

**STATE OF NEW JERSEY** :  
: SS  
**COUNTY OF UNION** :

**A F F I D A V I T**

I/We \_\_\_\_\_ and \_\_\_\_\_ of full age and being duly sworn according to law and under oath say:

1. I/We am/are currently domiciled (maintain a permanent residence) in \_\_\_\_\_ (municipality/borough/township name) at \_\_\_\_\_ (address).

2. I/We have permitted \_\_\_\_\_, the parent of \_\_\_\_\_ to reside in my home and remain there for, at least, the duration of a calendar year and not merely the school year or during school days/weeks.

3. This affidavit, together with my proofs of residence, has been provided specifically to induce the Springfield Board of Education to accept \_\_\_\_\_'s child as a student who is legally qualified to attend Springfield Public Schools, without payment of tuition.

4. I/We represent that the answers, statements, declarations, and other representations made in this affidavit as well as my/our registration forms and proofs are absolutely true in all respects and know that the Springfield Board of Education will rely upon same.

5. I/We fully understand and agree that if any significant change occurs regarding the student's current living arrangement, I/we am obligated to report same to Springfield administration immediately. Significant change, as described herein includes, but is not limited to, the parent/guardian and/or child's relocation. I/We will provide notice of any such significant change to Springfield administration within 5 days of its occurrence.

6. I/We fully understand and accept that this affidavit shall expire upon the last school day of the school year in which it was executed. I/We further understand and accept that it is my/our obligation to ensure that a new affidavit is completed and submitted to Springfield administration on or before the start of each new school year in which I will seek for the student to remain enrolled in Springfield.

7. I/We fully understand and accept that any false or fraudulent statements, answers or declarations contained in this affidavit or my proofs shall render me/us personally liable to the Springfield Board of Education for full payment of tuition for the school year in which the affidavit is executed. At present that tuition amount is an estimated \$ \_\_\_\_\_.

8. I/We fully understand and agree that, if I/we fraudulently allow the child named above to claim residence at my/our address, I/we will have committed a disorderly persons offense. If I am convicted of

such an offense, I/we may be fined up to \$1,000.00 and/or be imprisoned for up to six months.

9. I/we fully understand and agree that any false statements, answers, or declarations contained in this affidavit may subject me/us to criminal prosecution for the crime of false swearing in violation of N.J.S.A. 2C:28-2. If I/we am/are convicted for such a crime, I/we may be punished by a fine of up to \$7,500.00 and/or be imprisoned for up to 18 months.

\_\_\_\_\_  
RESIDENT-HOME PROVIDER

\_\_\_\_\_  
RESIDENT-HOME PROVIDER

Sworn and subscribed  
before me on this \_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
A Notary Public of the  
State of New Jersey

My commission expires \_\_\_\_\_

**SPRINGFIELD PUBLIC SCHOOLS  
Springfield, New Jersey 07081**

**AFFIDAVIT OF RESIDENCY  
(Parent and Child in Home of Springfield Resident)**

**STATE OF NEW JERSEY** :  
: **SS**  
**COUNTY OF UNION** :

**A F F I D A V I T**

I \_\_\_\_\_ of full age and being duly sworn according to law and under oath say/s:

1. I am currently living in the home of Springfield resident \_\_\_\_\_ with my child \_\_\_\_\_ at \_\_\_\_\_ (address). I plan for me and my child to live at this address for, at least, the duration of a calendar year and not merely the school year or during school days/weeks.

2. This affidavit, together with my registration forms and proofs, have been provided specifically to induce the Springfield Board of Education to accept my child as a student who is legally qualified to attend Springfield Public Schools, without payment of tuition.

3. I represent that the answers, statements, declarations, and other representations made in this affidavit as well as my registration forms and proofs are absolutely true in all respects and know that the Springfield Board of Education will rely upon same.

4. I fully understand and agree that if any significant change occurs regarding my or my child's current living arrangement, I am obligated to report same to Springfield administration immediately. Significant change, as described herein includes, but is not limited to, my and/or my child's relocation to another residence, even where the relocation is anticipated to be temporary. I will provide notice of any such significant change to my child's school principal no later than 5 days of its occurrence.

7. I fully understand and accept that this affidavit shall expire upon the last school day of the school year in which it was executed. I further understand and accept that it is my obligation to ensure that a new affidavit is completed and submitted to Springfield administration on or before the start of each new school year in which I will seek for my child to remain enrolled in Springfield.

8. I fully understand and accept that any false or fraudulent statements, answers or declarations contained in this affidavit, my registration forms, or proofs shall render me personally liable to the Springfield Board of Education for full payment of tuition for the school year in which the affidavit is executed. At present that tuition amount is an estimated \$ \_\_\_\_\_.

9. I fully understand and agree that, if I fraudulently caused or allowed my child to pretend to reside in the home of a Springfield resident, I may be guilty of having committed a disorderly persons offense. If I am convicted of such an offense, I may be fined up to \$1,000.00 and/or be imprisoned for up to six months.

10. I fully understand and agree that any false statements, answers, or declarations contained in this affidavit may subject me to criminal prosecution for the crime of false swearing in violation of N.J.S.A. 2C:28-2. If I am convicted for such a crime, I may be punished by a fine of up to \$7,500.00 and/or be imprisoned for up to 18 months.

\_\_\_\_\_  
PARENT/GUARDIAN

\_\_\_\_\_  
PARENT/GUARDIAN

Sworn and subscribed  
before me on this \_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
A Notary Public of the  
State of New Jersey

My commission expires \_\_\_\_\_