

CHILD'S NAME _____

OLEAN CITY SCHOOL DISTRICT

AFFIDAVIT OF DISTRICT RESIDENT IN CUSTODIAL RELATIONSHIP

This is a legal document. The information provided by you will be used by the Olean City School District to determine whether the child is entitled to a free education in this District.

STATE OF NEW YORK)
COUNTY OF _____)

The undersigned, being duly sworn, depose(s) and state(s) as follows:

1. Child's date of birth: _____
2. Names of the District Resident(s) in a Custodial Relationship to the Child ("Custodial Parents/Guardians"):
 - (a) Parent/Guardian 1: _____
 - (b) Parent/Guardian 2: _____
3. Address of permanent residence of Custodial Parents/Guardians:

4. With respect to the permanent residence, state whether it is owned or leased, how long it has been owned or leased, and if leased, when the lease will expire:

Own _____ Lease _____

Length of the time owned: _____

Length of time leased: _____

Expiration date of lease: _____
5. Telephone Numbers of Custodial Parents/Guardians:
 - (a) Parent/Guardian 1: Home: _____ Work: _____
 - (b) Parent/Guardian 2: Home: _____ Work: _____

10. State the reason(s) why the child is residing with the Custodial Parents/Guardians:

11. How long do you expect that the child will continue to reside with the Custodial Parents/Guardians?

12. State the name(s) and address(es) of any other individual(s) with whom the child now lives. If the child lives in multiple locations, indicate the name(s) and address(es) of the individual(s) with whom the child lives at various times, and amount of time spent at each location, and why the child lives there:

13. State who will claim the child as a dependent for the current tax year:

14. Do the natural parents provide any financial support for the child? If so, how much and how often?

22. When the child discontinues residing with the Custodial Parents/Guardians, state where and with whom is it expected that the child will reside:

23. Has parental custody and control been legally transferred to the Custodial Parents/Guardians? If so, when and why was the transfer made?

24. Do the natural parents expect to take back parental custody and control?

Yes _____ No _____

If yes, state when and why:

Please note that additional documentary evidence may be required after this Affidavit is reviewed.

The undersigned understands that this Affidavit is being submitted to the Olean City School District (the "District") together with an Affidavit of the Natural Parents for the purpose of establishing the legal residence of the child for school purposes and inducing the District to admit the child to its schools. The undersigned further understands that the information contained in this Affidavit will be relied on by the District.

The undersigned further understands that the conditional admission of the child by the District does not constitute a determination binding on the District as to the question of residency.

It is understood that the District reserves the right to request additional information and to investigate the facts and circumstances involving the residence of the child for school purposes. In the event that it is determined that the child is not a resident of the District for school purposes, the child will be dismissed from school, and the undersigned hereby agrees to be responsible for payment in full of the tuition charge, plus interest at the statutory judgment rate,

CHILD'S NAME _____

OLEAN CITY SCHOOL DISTRICT

AFFIDAVIT OF NON-RESIDENT NATURAL PARENT

This is a legal document. The information provided by you will be used by the Olean City School District to determine whether the child is entitled to a free education in this District.

STATE OF _____)

COUNTY OF _____)

The undersigned, being duly sworn, depose(s) and state(s) as follows:

1. Child's date of birth: _____

2. Names of the child's natural parents:

(a) Parent 1: _____

(b) Parent 2: _____

3. Address of permanent residence:

(a) Parent 1: _____

(b) Parent 2: _____

4. Telephone Numbers:

(a) Parent 1: Home: _____ Work: _____

(b) Parent 2: Home: _____ Work: _____

5. With respect to the permanent residence, state whether it is owned or leased, how long it has been owned or leased, and if leased, when the lease will expire:

(a) Parent 1: Own _____ Lease _____

Length of time owned: _____

Length of time leased: _____

Expiration date of lease: _____

(b) Parent 2: Own _____ Lease _____

Length of time owned: _____

Length of time leased: _____

Expiration date of lease: _____

6. Occupation:

(a) Parent 1: _____

(b) Parent 2: _____

7. Name and address of employer and typical work hours and work days:

(a) Parent 1: _____

Work Hours: _____

Work Days: _____

(b) Parent 2: _____

Work Hours: _____

Work Days: _____

8. State whether the natural parents are separated or divorced:

9. If separated or divorced, state which parent was granted custody of the child:

10. State by what authority custody was granted:

(a) Court order (name court, date of decree or order);

(b) By agreement (type of agreement and date).

11. State the name(s) and address(es) of the individual(s) with whom the child has lived during the past three years and indicate the period of residence:

12. State the name(s) and address(es) of the individual(s) with whom the child now lives (the "Custodial Parents/Guardians").

13. Telephone Number for Custodial Parents/Guardians:

Home: _____ Work: _____

14. How long do you expect that the child will continue to reside in his or her present location(s)?

15. State the relationship of the Custodial Parents/Guardians to the child:

16. State the reasons why the child is residing with the Custodial Parents/Guardians:

17. State who will claim the child as a dependent for the current tax year:

18. Do the natural parents provide any financial support for the child? If so, how much and how often?

19. Do the Custodial Parents/Guardians provide any financial support for the child? If so, how much and how often?

20. State who is responsible for providing the child with food, clothing and other necessities:

21. How often does the child visit the natural parents or stay with (i.e., stay overnight with) the natural parents?

22. Who should be contacted in the event of a medical or any other emergency?

23. If consent is needed to release child's records, or if a consent is required for some other activity (*e.g.*, field trip), who should be contacted and who will provide the consent?

24. Who should be contacted in the event that disciplinary action is taken against the child or if specific academic problems arise?

25. State when the child is expected to discontinue residing with the Custodial Parents/Guardians:

26. When the child discontinues residing with the Custodial Parents/Guardians state where and with whom is it expected that the child will then reside:

27. Has parental custody and control been legally transferred to the Custodial Parents/Guardians? If so, when and why was the transfer made?

28. Do the natural parents expect to take back parental custody and control?

Yes _____ No _____

If yes, state when and why:

29. Does the child have any brothers or sisters? If so, state their name, address and age. If they are school-age children and do not reside with their natural parents, why do they reside elsewhere and with whom do they reside?

Please note that additional documentary evidence may be required after this Affidavit is reviewed.

The undersigned understands that this Affidavit is being submitted to the Olean City School District (the "District") together with an Affidavit of the District Resident in Custodial Relationship for the purpose of establishing the legal residence of the child for school purposes and inducing the District to admit the child to its schools. The undersigned further understands that the information contained in this Affidavit will be relied on by the District.

The undersigned further understands that the conditional admission of the child by the District does not constitute a determination binding on the District as to the question of residency.

It is understood that the District reserves the right to request additional information and to investigate the facts and circumstances involving the residence of the child for school purposes. In the event that it is determined that the child is not a resident of the District for school purposes, the child will be dismissed from school, and the undersigned hereby agrees to be responsible for payment in full of the tuition charge, plus interest at the statutory judgment rate, and any other damages arising therefrom, including the cost incurred by the District to collect such charges, which cost shall include reasonable legal fees.

I declare under penalty of perjury that the foregoing is true and correct. I understand that making a false statement under oath is a crime and may subject me to criminal and/or civil penalties.

Dated: _____

Signature

Print Name

Sworn to before me this

_____ day of _____, 20____

Notary Public

Dated: _____

Signature

Print Name

Sworn to before me this

_____ day of _____, 20____

Notary Public

