



Westampton Township Public Schools

700 Rancocas Road
Westampton, NJ 08060

Affidavit of Residency

To be completed by Parent/Guardian of Student(s)

Student Name: _____ Relationship: _____

Student Name: _____ Relationship: _____

Student Name: _____ Relationship: _____

Student Name: _____ Relationship: _____

I, _____ will be residing at _____
(Parent/Guardian Name Printed) (Address)

Westampton, NJ on a permanent basis with the above named student(s), for who I am the legal parent/guardian. In order to document the validity of this arrangement, I am providing the following **3 proofs** of my residency one of which must be a photo ID. I understand that all proofs must be provided within 30 days of registration or student(s) will have to be transferred out immediately.

Utility Bill _____ Telephone Bill _____ Pay Check/Stub _____ Court /Custody Order _____ Car Insurance _____
Credit Card _____ Car Registration _____ DMV Change of Address/Updated License _____ Social Services Document _____

NO OTHER PROOF OF RESIDENCY WILL BE ACCEPTED

All monthly proofs must be dated within the past 30 days of completion of this affidavit form to be considered valid.

Please initial the following statements:

I will notify a school official immediately when student(s) no longer resides at this address on a full time basis. _____

I understand this affidavit of residency and it is true and correct. _____

I understand that I can be held legally responsible for any violation of N.J.S.A. 18A:38-1 (c) as a disorderly person for fraudulently allowing the use of my residence for the purpose of receiving a free public education in the Westampton Township Public Schools. _____

I understand that I will be charged tuition for the number of days attended under a fraudulent affidavit. _____

I understand that this affidavit will need to be renewed on an annual basis or at lease end date (if applicable). _____

Print Name

Email Address

Signature of Parent/Guardian

Phone

NOTARY:

Sworn to and subscribed before on this _____ day of _____ 20____

NOTARY SIGNATURE

RENEWAL DATE: _____