

NORWOOD CITY SCHOOL DISTRICT

AFFIDAVIT OF RESIDENCY

This affidavit is used when the parent/legal guardian and child are living in a domicile belonging to another person or leased to another person and have no other accepted Residency Document in the parent/legal guardian name.

PLEASE NOTE: This Affidavit is to be signed by:
PROPERTY OWNER in front of a Notary Public.
The information submitted will be verified for authenticity with the Hamilton Co. Auditor
@ <http://wedge.hcauditor.org/>

I _____, being duly cautioned, do hereby swear or affirm the following:

I am the owner of the residence at _____ Apartment # _____
ADDRESS OF NORWOOD PROPERTY

I live at _____
STREET ADDRESS, CITY, STATE, ZIPCODE

my Home/Cell phone (____)____-____ my Work/other phone (____)____-____

Listed below are all the occupants at the above address and their relationship to the tenant:
(This affidavit must list ALL the residents within the dwelling/apartment)

Names	Age	Relationship to Tenant
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I acknowledge and understand that if the above information is not true and correct, that information has not been withheld, concealed or misrepresented, and that knowingly swearing or affirming the truth thereof constitutes criminal falsification, a violation of Ohio Revised Code Section 2921.13 (D), and 2921.21 a first degree misdemeanor, punishable by a maximum fine of \$1,000 and/or maximum term of imprisonment of six months. Further, if the student is found to not be a legal resident, the district will seek remuneration for each day the student illegally attended school in the district.

I agree that Norwood City Schools, if they deem necessary, have the right to investigate my residency. I agree to allow the release of rental information and also utility customer information to a representative of Norwood City Schools.

MUST BE SIGNED IN FRONT OF NOTARY PUBLIC

Property Owner's Name (please print): _____
Property Owner's Signature: _____ Date: _____
Parent/Guardian Signature: _____ Date: _____

TO BE COMPLETED BY NOTARY

Subscribed and sworn to (or affirmed) before me, a Notary Public of the State of Ohio, on this ____ day of _____, 20____
_____, who said that he/she testifies that the above information is a true and accurate statement.

NAME OF PERSON BEFORE ME

In Testimony whereof, I have hereunto subscribed my name and affixed my official seal.

NOTARY PUBLIC SIGNATURE MY COMMISSION EXPIRES

If your name is not printed with your seal, please print here: _____