

NORWOOD CITY SCHOOL DISTRICT

AFFIDAVIT OF RESIDENCY

STATE OF OHIO, COUNTY OF HAMILTON
SWORN STATEMENT OF RESIDENCY IN NORWOOD, OHIO

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/>

Student Names	Date of Birth	Grade	School Attending
_____	__/__/__	_____	_____
_____	__/__/__	_____	_____
_____	__/__/__	_____	_____
_____	__/__/__	_____	_____
_____	__/__/__	_____	_____

PARENT/ GUARDIAN(S): _____

ADDRESS OF PROPERTY: _____

My signature acknowledges that as the Parent/Guardian, I understand that if any investigation reveals that my child(ren) and I do not reside full-time in the Norwood City School District, my child(ren) shall be immediately withdrawn from the school district and I will be charged a tuition penalty, payable to the Norwood City School District in the amount of \$50.78 per day for the entire time the each student attended school if false information is presented on this form.

PARENT/ GUARDIAN(S) SIGNATURE: _____ DATE: _____

NORWOOD PROPERTY OWNER I being duly cautioned, do hereby swear or affirm the following:

I, _____ the owner of the property at the above named address, do verify that the Parent/ Guardian named above is a full-time resident at this address.

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

Relation to student: _____ Family move in date: _____

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.

MUST BE SIGNED IN FRONT OF NOTARY PUBLIC

PROPERTY OWNER'S 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 APPEARING 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: _____

NORWOOD CITY SCHOOL DISTRICT

AFFIDAVIT OF RESIDENCY DECLARACIÓN DE RESIDENCIA

STATE OF OHIO, COUNTY OF HAMILTON

ESTADO DE OHIO, CONDADO DE HAMILTON

SWORN STATEMENT OF RESIDENCY IN NORWOOD, OHIO

DECLARACIÓN JURADA DE IMPLANTACIÓN EN NORWOOD, OHIO

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/>

Estudiante Llama	Fecha de Nacimiento	Grado	Asistencia Escolar
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____
_____	___/___/___	_____	_____

GUARDA / PATERNAL (S): _____

DIRECCIÓN DE PROPIEDAD: _____

Mi firma reconoce que como el Padre/Guarda, entiendo que si investigación revela que mi niño (ren) y no resido de jornada completa en el Distrito de Escuela de Norwood City, mi niño (ren) será inmediatamente retirado del distrito escolar y será cobrado una pena de cuota escolar, pagadera al Distrito de Escuela de Norwood City en cantidad de 50.78 dólares por día para el tiempo entero el cada estudiante asistió a la escuela si la información falsa es presentada en esta forma.

GUARDA / PATERNAL (S) FIRMA: _____ FECHA: _____

NORWOOD PROPERTY OWNER I being duly cautioned, do hereby swear or affirm the following:

El DUEÑO de NORWOOD PROPERTY yo debidamente advertido, jure realmente por este medio o afirme lo siguiente:

I, _____ the owner of the property at the above named address, do verify that the Parent/ Guardian named above is a full-time resident at this address.

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

Relation to student: _____ Family move in date: _____

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.

MUST BE SIGNED IN FRONT OF NOTARY PUBLIC

PROPERTY OWNER'S SIGNATURE: _____ DATE: _____

TO BE COMPLETED BY NOTARY / SER COMPLETADO POR NOTARIO

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 APPEARING 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: _____