BRICK TOWNSHIP PUBLIC SCHOOLS
Residency/Guardianship Affidavit

The Brick Township School District conducts a thorough review of all "affidavit students" to insure that all students attending the District's schools are the legal responsibility of the District. An "affidavit student" is a student who is living in the home of a person who resides in the District and who agrees to support the student without charge, as if the student were that person's own child.

NJ 18A:38-1 provides Boards of Education with the authority to demand sworn statements from any non-parent stating that:

A. He/She is supporting the child without charge
B. He/She is assuming all personal obligations pertaining to the child's school requirements.
C. He/She intends to support the child for the ***full 12 months of the year***.

In addition, the non-parent is required to provide the District with proof of their residency in the form of a tax bill, lease or mortgage information (no dollar amounts need be submitted).

The legal parent/guardian of the child must also submit a notarized letter indicating that they have given their permission for the student to reside with the non-parent.

NOTE:

- **The non-parent may be assessed the penalty of a pro-rated tuition if the child is enrolled in violation of the residency requirements.**
- **Criminal charges may also be filed if it is proven that a fraudulent claim of primary financial support has taken place. The individual would be deemed a disorderly person and could be punished by up to six (6) months imprisonment and/or a fine of up to a $1000.00.**

Having read and understood the legal requirements described above, I

_____ _____ _____

NAME (PLEASE PRINT) STREET ADDRESS CITY, STATE, ZIP CODE

attest to the above address as my legal residence and I accept full responsibility for the claim that

_____ _____shall be domiciled in my home from this

(Student Name) (Current School)

date forward at this address and shall remain my full responsibility without charge or support from his/her natural parents for a period of ***12 months per year***.

- **My signature also verifies the knowledge that by my support, the named child cannot be claimed by his/her natural parents as a deduction for Federal Income Tax purposes, and that this information may be provided to the appropriate agencies to enforce these requirements.**
- **I herewith agree to have the District Attendance Officer visit my home in order to validate residency of the student.**

Sworn and subscribed to before me this

_____

_____ day of _____ 20_____ Signature of Guardian

_____

Name of Official

_____

Date

_____

Title of Official

Copies: District Attendance Officer – School **C-1**

BRICK TOWNSHIP PUBLIC SCHOOLS

Student Residency Notification

(Student Over Age of 18 & Residing with a Brick Resident)

I, _____, _____, _____
Student Name | Current Street Address | City, State, Zip Code

_____ _____
Date of Birth | Current School / Address

hereby verify that I am over the age of 18 (Birth Certificate provided) and will be residing at the home of

_____,_____, _____
(Homeowner/Resident) - Please Print) | Street Address | City, State, Zip Code

Proof of Residency Submitted _____ _____
(Tax Bill – Lease – Mortgage Information) | Date

and will be attending _____
Name of Brick School

- **I understand that I may be assessed the penalty of a pro-rated tuition if my enrollment is in violation of the residency requirements.**
- **I understand that criminal charges may be filed if it is proven that a fraudulent claim of residency has taken place.**
- **I understand that the District Attendance Officer has the right to visit the home to verify residency.**

Sworn and subscribed to before me this

_____ day of _____ 20_____

_____
Signature of Student

_____
Date

_____
Signature of Homeowner (Resident)

_____
Name of Official

_____
Date

_____
Title of Official