

Affidavit of Receiving Party

STATE OF NEW YORK)
COUNTY OF _____) SS:

Notice: This statement should be completed by the person (other than the parent) with whom the student is residing within the Phoenix Central School District. The parent has given permission for this agreement.

Student Information

1. Name: _____
 2. Date of Birth: _____ Grade Level: _____
 3. Current Address: _____

 4. Telephone #: _____
 5. Length of time student at current address: _____
Years Months Weeks
-

Mother's Information

6. Name: _____
 7. Current Address: _____

 8. Telephone #: _____
 9. Length of time student at current address: _____
Years Months Weeks
-

Father's Information

10. Name: _____
 11. Current Address: _____

 12. Telephone #: _____
 13. Length of time student at current address: _____
Years Months Weeks
-

14. If parents are divorced, please state custody arrangements: _____

15. If you are a non-custodial parent, please attach/provide a notarized statement from the custodial parent consenting to student's residing with you.

16. Relationship with student (e.g. mother, father, stepmother, stepfather, adoptive parent, legal guardian, legal custodian, other): _____

17. Student's previous addresses (list most recent first):

a. Date: From _____ To _____
Address: _____

b. Date: From _____ To _____
Address: _____

c. Date: From _____ To _____
Address: _____

If student does not claim residency with mother or father, please answer the following questions –

18. Basis of relationship with student:

a. Legal guardianship of student? Yes No
If yes, attach a copy of court papers.

b. Legal custody of student? Yes No
If yes, attach a copy of court papers.

c. Other legal control over student Yes No
(e.g. adoption, court-ordered placement, Surrender, abandonment).
If yes, attach copy of court papers or provide explanation. _____

d. Other relationships with student: Yes No
Please explain. _____

19. When did the student begin to live with you? _____

Date

20. How long will the student reside with you? _____

Date

21. Will the student live with you during school vacation? Yes No

If not, where do you expect the student to reside during that time?

22. Who will claim the student as a dependent for Income Tax purposes?

23. During the time the student will reside with you, who is responsible for:

a. Receiving and responding to academic and other reports concerning the student?

b. Making decisions regarding the student's education?

c. Authorizing medical treatment for the student?

d. Payment for medical treatment of the student?

e. Releasing records for the student?

f. Providing other necessary consents for the student?

g. Expense of student's room and board?

h. Expenses of clothing and other necessities?

24. Will there be any period of time when this student will not live with you while attending the Phoenix Central School District? Yes No

If yes, please state where the student will reside and for how long?

25. What are the circumstances which brought this student to reside with you?

26. Other comments that would assist the Phoenix Central School District in acting on the application of this student.

I understand that this affidavit has been completed to establish the student as a resident, living within the Phoenix Central School District [the "District"] boundaries. As a result of the representations made by me in this affidavit, the District may admit the student to its schools on a tuition free basis. If any such representations are untrue, the District may be damaged, at least in the amount of tuition it should have received for the education of the student.

Therefore, I certify that all the information provided on this affidavit is true and accurate.

I understand that:

If I provide false information on this affidavit to the Phoenix Central School District, I may be committing the crime of perjury in the third degree (a class A misdemeanor);

If I provide false information on this affidavit to the Phoenix Central School District with the intent to defraud the Phoenix Central School District, I may be committing the crime of perjury in the second degree (a class E felony); and

I may be prosecuted on criminal charges for such false information.

Signature

Print Name

Sworn to before me this _____ day of _____, 20____.

Notary Public