

STUDENT NAME \_\_\_\_\_

Please Print

FOR 2022/2023 SCHOOL YEAR

This is a legal document. The information provided by you will be used by the Morris Hills Regional High School District to determine whether the pupil is entitled to a free education in this school district. Every question must be answered or the Affidavit will not be considered.

If the information provided is false, the Board of Education may seek to recover from you the cost of the education for the year(s) involved, at a cost of \$22,399.00 annually. In addition, the Board of Education may file, in the appropriate court, a disorderly person's charge against you for any willful misstatement.

AFFIDAVIT OF PARENT/GUARDIAN

STATE OF NEW JERSEY    )  
  ) ss.  
COUNTY OF MORRIS    )

\_\_\_\_\_, of full age, being sworn upon his/her oath  
(Parent's name)

according to law, deposes and says:

I. I/we reside at No. \_\_\_\_\_, in the Town of \_\_\_\_\_  
\_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_

I do/do not (circle one) own this property. If I own this property, I have attached a true copy of the Deed. If I lease the premises, I have attached a true copy of the lease. If I do not have a written lease, I have attached a notarized statement of landlord acknowledging tenancy. If applicable, the name and address of my/our landlord is \_\_\_\_\_  
\_\_\_\_\_

II. The information provided in this Affidavit is accurate and complete. I fully understand that I may be held responsible for payment of tuition in the amount of \$21,764.00 annually if the claim for school admission, free of charge, is rejected by the Commissioner of Education.

III. The following information is presented to the Board of Education in support of my request for free admission of

(Pupil's Name)

(Date of Birth)

A. 1. I am the Parent/Guardian (circle one) of \_\_\_\_\_  
(Pupil's name)

2. Parent completing Affidavit:

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address of other residences owned or leased by parent \_\_\_\_\_

\_\_\_\_\_

Work Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Number of years at present address \_\_\_\_\_

Social Security Number \_\_\_\_\_

3. Pupil's Other Parent:

Spouse's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address of other residences owned or leased by parent \_\_\_\_\_

\_\_\_\_\_

Work Phone # \_\_\_\_\_ Home Phone # \_\_\_\_\_

Number of years at present address \_\_\_\_\_

Social Security Number \_\_\_\_\_

4. If you, the parent, are married or living with someone other than the pupil's other parent, please fill in the following information concerning that person.

Name \_\_\_\_\_

5. Are there brothers or sisters of the pupil attending or about to be enrolled in the Morris Hills Regional High School District? \_\_\_\_\_

Are there any brothers or sisters of the pupil presently attending school in another district?  
\_\_\_\_\_

6. If answer to either or both of the preceding questions is "yes," in what district and school does each other child attend school?

Name \_\_\_\_\_

District \_\_\_\_\_ School \_\_\_\_\_

Name \_\_\_\_\_

District \_\_\_\_\_ School \_\_\_\_\_

7. If other brothers or sisters of this pupil are attending school in another district, why should this student be enrolled in this District? \_\_\_\_\_

\_\_\_\_\_

8. If you are no longer married or living with the pupil's other parent, do you have court awarded custody? \_\_\_\_\_

If yes, please attach a copy of all official court orders.

B. 1. School and grade pupil desires to attend: \_\_\_\_

2. School pupil last attended

\_\_\_\_\_  
(Name of School) (Address)

3. Date of last attendance: \_\_\_\_\_

4. Address at which this pupil is now living:

\_\_\_\_\_  
(No.) (Street)

\_\_\_\_\_  
(Town) (State) (Zip Code)

5. Telephone Number: \_\_\_\_\_

6. Last prior address of pupil:

\_\_\_\_\_  
(No.) (Street)

\_\_\_\_\_  
(Town) (State) (Zip Code)

C. 1. With whom does this pupil now live?

\_\_\_\_\_

(Last Name) (First Name)

Since when? \_\_\_\_\_

2. Name and address of resident with whom the pupil will be living.

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3. What relation to the pupil is the person named in C-2? \_\_ (Be Specific)

4. Is any individual named as the pupil's legal guardian? \_\_ (Provide Proof)

Name \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Pupil \_\_\_\_\_

Date Guardianship commenced \_\_\_\_\_ (Provide Proof)

5. Why is this pupil not living with you? \_\_\_\_\_

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(Be Specific)

6. I am not capable of supporting or providing care for the child due to family or economic hardship, for the following reasons:

(Be Specific) \_\_\_\_\_

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7. The pupil will/will not (circle one) be residing with the individual named in C-2 for the sole purpose of receiving a free public education in the district.

- D. 1. Do you, the parent(s), currently pay any of the costs of maintaining this Pupil? \_\_\_\_\_  
2. If so, how much?           \$ \_\_\_\_\_ per week  
  \$ \_\_\_\_\_ per month  
  \$ \_\_\_\_\_ per year

For what purpose? \_\_\_\_\_

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E. 1. During the school year when the pupil resides with the Resident names in C.2., will you, the parent(s), provide any payments or contributions to the Resident, either in money or in food, clothing, medical insurance/expenses, recreation, or any other thing or service of value in connection with the support, maintenance or education of the pupil?

Yes \_\_\_\_\_                      No \_\_\_\_\_

Explain (Be specific as to the Amount, Type and Purpose of Payment or Contribution)

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F. 1. Who is furnishing the pupil a permanent home at his/her own expense?

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2. Who is financially responsible for the pupil?

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3. Who is providing medical insurance for the pupil?

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Name of policyholder and insurance company, if applicable.

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4. When do you expect the pupil to move out of your home? \_\_\_\_\_ (Provide specific date.)

5. When do you expect the pupil to move out of the District resident's home?  
\_\_\_\_\_ (Provide specific date.)

G. 1. Have you declared this pupil as a dependent for federal income tax purposes? \_\_\_\_\_  
For what years? \_\_\_\_\_  
(Provide copies of IRS 1040 Form)

2. Will you declare this pupil as a dependent for federal income tax purposes during the time the pupil resides with the resident named in C.2.? \_ Provide a copy of your latest 1040 IRS return.

3. If you will not declare the pupil as a dependent for federal income tax purposes during the time the pupil resides with the resident named in C.2., who will claim the pupil?  
\_\_\_\_\_

H. 1. Does this pupil currently live with his/her parents any part of the week? \_\_\_\_\_  
If so, how many days per week? \_\_\_\_\_

2. Any part of the month? \_\_\_\_\_  
If so, how many days per month? \_\_\_\_\_

3. Any part of the year? \_\_\_\_\_

If so, how many days per year? \_\_\_\_\_

- I. 1. During the school year, will this pupil live with his/her parents any part of the week?

\_\_\_\_\_   
 If so, how many days per week? \_\_\_\_\_

2. Any part of the month? \_\_\_\_\_   
 If so, how many days per month? \_\_\_\_\_

3. Any part of the year? \_\_\_\_\_   
 If so, how many days per year? \_\_\_\_\_

4. Will this pupil live with his/her parents during the summer? \_\_\_\_\_

- J. 1. Is this pupil a state ward? \_\_\_\_\_

2. State the name and address of anyone who provides any part of this child's support and state the amount of such support. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- K. 1. Are this pupil's expenses paid fully or in part by any charitable agency? \_\_\_\_\_

2. If so, give name and address of agency? \_\_\_\_\_

\_\_\_\_\_

- IV. I am making this affidavit pursuant to N.J.S.A. 18A:38-1(b), to induce the Morris Hills Regional High School District to accept said pupil in the public schools of the District free of charge.

- V. I will make no contribution or payment either in money or in kind for food, clothing, recreation, medical insurance/expense, lodging, or any thing or service of value, or other costs and expenses in connection with the support, maintenance or education of the said pupil.



- VI. The resident named in Section III.C.2 will keep and support the pupil gratuitously as if the said pupil were their own with no contribution or payment, either in money or in kind for food, clothing, recreation, medical insurance/expense, lodging, or anything or service of value, or other costs and expenses in connection with the support, maintenance or education of the said pupil.
- VII. I understand that if any of the information provided above is changed, for any reason, it is my responsibility to immediately notify the Chief School Administrator of the Morris Hills Regional High School District.

The above statements and attachments are true and complete to the best of my knowledge. I know that if they are willfully false, I am subject to punishment, including, but not limited to, prosecution and personal liability for the payment of tuition for the entire school year, or any portion thereof.

\_\_\_\_\_  
 (Signature - Parent or Guardian)

Sworn to and subscribed  
 before me this \_\_\_\_\_  
 day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
 Notary Public

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FOR ADMINISTRATIVE OFFICE USE

\_\_\_\_\_ is approved for admission to

\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Secretary, Board of Education

Attachment Checklist:

- Copy of Lease or Deed
- IRS 1040
- Proof of Guardianship or Application