



# SPRING-FORD AREA SCHOOL DISTRICT

DISTRICT ADMINISTRATION OFFICE

857 SOUTH LEWIS ROAD, ROYERSFORD, PA 19468

## RESIDENCY AFFIDAVIT

**Needs to be completed only if the parent/guardian's name does NOT appear on the deed/settlement papers or lease agreement.**

Please be sure to provide the completed Residency Affidavit along with the Deed / Signed Settlement papers or Current Signed Lease agreement to the Registrar.

I/We attest that all information provided here is correct and current. I/We understand that if residency should change, for any reason, it is the responsibility of the resident to notify the school district and amend the Residency Affidavit. Any false statements can and will be punishable by law.

I/We, \_\_\_\_\_, currently reside at  
(Resident's Name)

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

Telephone Number: \_\_\_\_\_

### HOMEOWNER'S VERIFICATION

Homeowner's name \_\_\_\_\_ Telephone number \_\_\_\_\_

Approval has been granted for \_\_\_\_\_ to reside with  
(Child's/Children's Name)

\_\_\_\_\_, at the address listed above.  
(Parent/Guardian's Name)

Homeowner's Signature \_\_\_\_\_ Date \_\_\_\_\_

### LANDLORD'S VERIFICATION

Landlord's name \_\_\_\_\_ Telephone number \_\_\_\_\_

Approval has been granted for \_\_\_\_\_ to reside with  
(Child's/Children's Name)

\_\_\_\_\_, at the address listed above.  
(Parent/Guardian's Name)

Landlord's Signature \_\_\_\_\_ Date \_\_\_\_\_

**(Continued on following page)**

Through my/our notarized signature, I/we grant the Spring-Ford Area School District permission to investigate the above information that I/we have presented in this affidavit for confirmation and factual accuracy.

**Notwithstanding any other provision of law to the contrary, a person who knowingly provides false information in the sworn statement for the purpose of enrolling a child in a school district for which the child is not eligible commits a summary offense and shall, upon conviction for such violation, be sentenced to pay a fine of no more than three hundred dollars (\$300) for the benefit of the school district in which the person resides or to perform up to two hundred forty (240) hours of community service, or both. In addition, the person shall pay all court costs and shall be liable to the school district for an amount equal to the cost of tuition calculated in accordance with section 2561 during the period of enrollment**

\_\_\_\_\_  
Home Owner or Landlord Signature

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Home Owner or Landlord Please Print Name

\_\_\_\_\_  
Parent/Guardian Please Print Name

State \_\_\_\_\_ of \_\_\_\_\_  
County

of \_\_\_\_\_  
On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, known to me (or satisfactorily proven to be) the person(s) whose name(s) is/are subscribed to the within affidavit and who acknowledged that he/she/they executed the same for the purposed contained within.

Sworn and Subscribed to  
Before me this \_\_\_\_\_ day  
Of \_\_\_\_\_  
\_\_\_\_\_

Notary Public  
My Commission Expires: \_\_\_\_\_