

HAWTHORNE SCHOOL DISTRICT  
RESIDENCY AFFIDAVIT # 5 (NON-RENT PAYING)  
(PARENT/GUARDIAN)

STATE OF NEW JERSEY:

SS:

COUNTY OF PASSAIC :

I, \_\_\_\_\_, of full age, being duly sworn according to law, upon my oath depose and say:

1. I am the parent/guardian of a children by the name of \_\_\_\_\_ (hereinafter referred to as (“my child”).
  
2. I temporarily/permanently (cross out inapplicable term) reside at \_\_\_\_\_, in the Borough of Hawthorne, County of Passaic and State of New Jersey. This has been my place of residence since \_\_\_\_\_. If my residence in these premises is temporary, I plan to reside here until \_\_\_\_\_.
  
3. I do not own or pay rent for the premises in which I currently reside. I reside in these premises gratis with, and/or with the approval of, the owner/tenant (cross out the inapplicable term). If the premises are rented, I have attached a copy of the lease (or signed copies of Residency Affidavit #2 (Rent Paying) if the tenant has not executed a lease with the landlord. If the premises are owned, I have attached a copy of the deed.
  
4. I desire to register my children in the Hawthorne School District.
  
5. I am aware that I have the obligation to notify the Hawthorne School District immediately in the event I cease to be a temporary resident at the Hawthorne address listed above.

6. I hereby assume joint and several liability, along with the owner or tenant of the residence listed above, for any tuition assessed if my child is determined to have been ineligible for tuition-free enrollment in the Hawthorne Public Schools during any period of tuition-free enrollment which was allowed by the Board either partially or entirely because of this Affidavit.
  
7. This Affidavit is submitted for the purpose of inducing the Hawthorne Board of Education to accept my child as a student in the Hawthorne School District on a tuition-free basis. I state that the information contained in this Affidavit is true and accurate and acknowledge the Board of Education's reliance upon the truthfulness and accuracy of this information. If any of the statements contained in this Affidavit are willfully false, I am aware that I am subject to the criminal penalties provided by law for perjury and/or false swearing, and will remain subject to all other obligations and/or liabilities which I have assumed elsewhere in this Affidavit.

\_\_\_\_\_  
Phone # \_\_\_\_\_

Sworn and subscribe to before  
Me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20 .

\_\_\_\_\_  
NOTARY PUBLIC