JACKSON LOCAL SCHOOL DISTRICT RESIDENCY AFFIDAVIT – Parent and Student

Ι,	having been duly advised and sworn, hereby state(s) as follows:					
	My current address is			Move-in dat	Move-in date	
1.						
2.	My email address is					
3.	I may be reached at: Cell: Home:					
4.	My previous address was					
5.	I hereby certify that I am the residential parent/legal guardian for school purposes of the following student(s) enrolling in the Jackson Local Schools, living at the above address (Please Print)					
	Full Na	Full Name Birthdate		School/Gr	School/Grade	
	Full Name Birthdate		Birthdate	School/Gr	School/Grade	
6.	We sleep the majority of time at the address listed.			Yes	No	
7.	We receive our mail at the address listed.				No	
8.	We eat our meals at the address listed.				No	
9.	. I registered to vote using the address listed.				No	
10.	. My driver's license shows the address listed.				No	
11.	. I notified my employer or Department of Public Assistance that my address is the same as the address listed.				No	
12.	My child is curren	Yes	No			
13.	13. I am not attempting to establish residence in Jackson Local School District under false pretenses.					
NOTICE: READ CAREFULLY: Knowingly falsifying this document is a violation of the Ohio Revised Code: Section 2921.13(A)(6) which is a First Degree Misdemeanor punishable by a prison term of six (6) months and/or a fine up to \$1000.00 Further the affiant will be billed (and prosecuted in court, if necessary) to collect all back tuition which may be due. Inaccurate and/or false information will result in immediate withdrawal of your child(ren) from the Jackson						
Local School District.						
Sigi	ignature: Date					
To be signed and dated in front of a Notary Public.						
STATE OF OHIO) COUNTY OF STARK) SS						
Sworn to before me and signed in my presence this day of				day of	20	
	(Seal)	My Commission expir	es			
		Date	NOTARY PUBLIC			