RIVERSIDE LOCAL SCHOOLS

585 Riverside Drive • Painesville • OH 44077

Phone (440) 352-0668 • FAX (440) 639-1959

AFFIDAVIT OF RESIDENCE

STATE OF OHIO)
) SSN:
COUNTY OF LAKE)

I, _____, being first duly sworn, deposes and says that:

1. I wish to enroll the following school-aged child(ren) in the Riverside Local School District:_____.

2. I am the custodial parent and/or legal guardian for the child(ren) whom I wish to enroll in the Riverside Local School District.

3. My child(ren) reside(s) with me at a dwelling maintained and occupied by others, and this dwelling is located at the following address: _____

_____

4. The address listed above is my permanent, actual residence within the Riverside Local School District.

5. I have no residence outside of the Riverside Local School District.

6. All of the information which I have provided to the Riverside Local School District in connection with the enrollment of my child(ren) is true and accurate, including the statements that I have sworn to in this affidavit.

7. I understand that making false sworn statements in connection with this matter to the officials of the Riverside Local School District may violate the criminal laws of the State of Ohio. FURTHER AFFIANT SAYETH NAUGHT.

Signature: _____

Printed Name: _____

SWORN TO BEFORE ME and SUBSCRIBED in my presence this _____ day of _____, 200___.

_____
Notary Public