

8. Why is the student living at the current location?

9. Will the student reside in your home during weekends, holidays, or any other times during his/her stay at the current locations? Explain:

10. Who will claim the student as a dependent for Income Tax purposes?

11. During the time student resides at the current location, who is responsible for:

a) Receiving and responding to academic and other reports concerning the student?

b) Making decisions regarding the student's education?

c) Authorizing medical treatment for the student?

d) Payment for medical treatment of the student?

e) Releasing records for the student?

f) Provide other necessary consents for the student?

g) Expense for the student's room and board?

h) Expense for clothing and other necessities?

12. Will you provide any other financial assistance to the student? ___ yes ___ no

If yes, what is the nature and amount of the assistance?

13. Please provide any other information that you believe would assist the Baldwinsville Central School District in acting on the application to enroll this student.

SIGNATURES & ACKNOWLEDGEMENT

I certify that all the information provided on this affidavit is true and accurate.

I understand that:

- If I provided any false information on this affidavit to the Baldwinsville Central School district, I may be committing the crime of perjury in the third degree (which is a Class A Misdemeanor),
- If I provide false information on this affidavit to the Baldwinsville Central School District with the intent to defraud the Baldwinsville Central School District, I may be committing the crime of perjury in the second degree (a Class E Felony); and
- I may be prosecuted on criminal charges for such false information.

Name of Parent: *(Printed)* _____

Parent Signature: _____

Date: _____/_____/_____

NOTARY VERIFICATION

On the _____ day of _____ in the year _____
Day Month Year

before me, the undersigned, a Notary Public in and for the said state, personally appeared

_____, personally known to me or proved to me on the
Name of Signer
basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he / she / they executed the same in his / her / their capacity(ies), and that by his / her / their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Signature of Notary Public