

STATE OF NEW YORK)
COUNTY OF ONONDAGA) SS.:

1. I am the _____ of _____;
[Relationship to Student] [Name of Student]

and the _____ of _____.
[Relationship to Parent] [Name of Parent]

6. Does or will the Parent live at any other additional locations while living with you?
_____ If so, at what location(s)?

When, how frequently, and for what periods of time will the Parent live at such location(s)?

I understand that this affidavit has been completed to establish the Parent and Student as residents, living within the LaFayette Central School District (the "District") boundaries. As a result of the representations made by me in this affidavit, the District may admit the Student to its schools on a tuition free basis. If any such representations are untrue, the District may be damaged, at least in the amount of tuition it should have received for the education of the Student.

Therefore,

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

I understand that:

if I provide false information on this affidavit to the LaFayette Central School District, I may be committing the crime of perjury in the third degree (a class A misdemeanor);

if I provide false information on this affidavit to the LaFayette Central School District with the intent to defraud the LaFayette 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.

(Signature)

Sworn to before me this ____
day of _____, 20__.

Notary Public