

FAIRFIELD PUBLIC SCHOOLS

NON-RESIDENT AFFIDAVIT

THIS AFFIDAVIT MUST ACCOMPANY A RESIDENCY AFFIDAVIT

I, _____, as the parent or legal guardian of:
(Name of Parent or Legal Guardian)

_____, _____, _____
(Name of Child) (Name of Child) (Name of Child)

_____, _____, _____
(Assigned School) (Assigned School) (Assigned School)

declare that the above child (children) is (are) residing with:

_____ at _____
(Name of Fairfield Resident) (Address of Fairfield Resident) (Phone Number)

on a permanent basis and:

- That I will not pay any compensation or other financial reimbursement for the care or support of the above-named child (children).
- That the above-named child (children) is (are) not living at this resident for the sole purpose of attending the Fairfield Public Schools.

Resident's Relationship to child/children: _____

I hereby acknowledge that all the statements contained in this affidavit are true and correct to the best of my knowledge and belief.

(Date) (Signature of Non-Resident Parent or Legal Guardian)

(Address of Non-Resident Parent or Legal Guardian) (Phone Number)

Personally appeared _____ and made oath to the truth of the foregoing statement.

Subscribed and sworn to before me this _____ day of _____, _____

(Notary Public) My Commission Expires _____ (Date)

(Accepted by Head of Security) (Date)

This certification is made acknowledging that, if it is not true, the Board of Education shall be entitled to reimbursement for education costs pursuant to S10-186(b)(4) of the Connecticut General Statutes and further may subject the undersigned to prosecution for larceny by defrauding a public community as defined in S53a-119(6) of the Connecticut General Statutes.