



ROCKAWAY BOROUGH SCHOOL DISTRICT

103 EAST MAIN STREET
ROCKAWAY, NEW JERSEY 07866
TEL: 973-625-8601
FAX: 973-625-7355

MRS. PHYLLIS ALPAUGH
SUPERINTENDENT OF SCHOOLS

RE: Resident/Parent Affidavits – Living with resident

Dear Parent/Guardian,

The Board believes that all persons in grades kindergarten through eighth grade who reside in the Rockaway Borough School District may attend District schools. All persons eligible for admission to the District's schools and who are domiciled with a Rockaway Borough resident must provide proof of domicile, in the form of a sworn statement.

If you are residing in the home of a Rockaway Borough resident and requesting admission of your child into the Rockaway Borough Schools, the attached affidavits must be completed and notarized prior to your child's admission. The first affidavit (RBRESAFF1/2) should be completed by the Rockaway Borough Resident with whom you reside and the second affidavit (RBRESAFF1/1) should be completed by the parent(s) of the student requesting admission in to the school district.

If you have any questions, do not hesitate to contact me.

Sincerely,

Phyllis Alpaugh

Phyllis Alpaugh
Superintendent of Schools

ROCKAWAY BOROUGH SCHOOL DISTRICT

AFFIDAVIT

TO BE COMPLETED BY ROCKAWAY BOROUGH RESIDENT

(This form must be completed when the parent(s) of a student requesting admission are residing with another family that is a resident of Rockaway Borough.)

I, _____ being duly sworn upon my oath, depose and say:
(resident's name)

1. I am the _____ of _____ and am making this
(relationship to student) (student's name)
affidavit in support of his/her application for admission to the Rockaway Borough Public
School District.

2. I am domiciled at _____, New Jersey.
(address)

3. My spouse _____, and I own the property located at the address listed
(spouse's name)
above.

4. My _____, _____, will
(relationship to parent) (parent(s) name(s))
reside at _____, N.J. with his/her child,
(address)
_____,
(child's name)

5. _____ have resided at this
(parent and student's full name)
address since _____ and will continue to reside at this address until _____.
(date) (date)

6. I am aware that if any of the foregoing statements made by me are false, I will be assessed
tuition by the Rockaway Borough School District for the entire period of
_____ ineligible enrollment.
(student's name)

7. I am aware that if any of the foregoing statements made by me are false, I may be subject to
punishment for false swearing.

8. I have attached the required documentation as outlined on page two of this document

Resident's signature

Resident's signature

Sworn to and subscribed

Before me on the _____ day of _____, 20__.

Notary Public

(seal)

ROCKAWAY BOROUGH SCHOOL DISTRICT

AFFIDAVIT

TO BE COMPLETED BY ROCKAWAY BOROUGH RESIDENT

As proof of residency, please attach to this affidavit at least **one document listed in Category A** and at least **two documents listed in Category B**. Please indicate with an "X" which documents are attached.

Category A – Attach a copy of at least one of the following documents:

- _____ The most recent real estate tax bill for my residence showing me as the taxpayer
- _____ A signed lease or deed for my residence
- _____ A closing statement for the purchase of residence

Category B – Attach a copy of at least two of the following documents that show your current address:

- _____ Driver's License
- _____ Gas, electric or water bill dated within the past 3 months
- _____ Home/apartment insurance certificate
- _____ First class mail/letter from state or federal agency dated within the past 3 months
- _____ Bank statement dated within the past 60 days

ROCKAWAY BOROUGH SCHOOL DISTRICT

AFFIDAVIT

TO BE COMPLETED BY PARENTS RESIDING WITH A ROCKAWAY BOROUGH RESIDENT

(This form must be completed when the parent(s) of a student requesting admission are residing with another family that is a resident of Rockaway Borough.)

I, _____ being duly sworn upon my oath, depose and say:

(parent(s) names)

1. I am the _____ of _____ and am making this affidavit in support of his/her application for admission to the Rockaway Borough Public School District.
(relationship to student) (student's name)

2. Until _____, I resided at _____.
(date) (previous address)

3. As of _____, my child _____ and I moved into the home of _____ at _____, New Jersey.
(date) (student's name) (resident's name) (resident's address)

4. _____, New Jersey is my true, fixed & permanent address.
(resident's address)

5. I am aware that if any of the foregoing statements made by me are false, I will be assessed tuition by the Rockaway Borough School District for the entire period of _____ ineligible enrollment.
(student's name)

6. I am aware that if any of the foregoing statements made by me are false, I may be subject to punishment for false swearing.

Resident's signature

Resident's signature

Sworn to and subscribed

Before me on the _____ day of _____, 20__.

Notary Public

(seal)