



# ROCKAWAY BOROUGH SCHOOL DISTRICT

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

MR. ANTHONY GRIECO  
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,

Anthony Grieco  
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)