

MAHOPAC CENTRAL SCHOOL DISTRICT
Office of Central Registration

Frank Miele
Acting Superintendent of Schools
845-628-3415 ext. 10500

Ellen Segarra, Central Registrar
845-621-0656 ext. 13506

RESIDENCY AFFIDAVIT

In the matter of the investigation of the Residence Status of:

Names(s)

Pursuant to Section 3202 of the Education Law
STATE OF NEW YORK

ss:

COUNTY OF PUTNAM

_____, being duly sworn, deposes and says:
Name of Legal Owner/Renter

1. I am the owner/renter of the property within the MAHOPAC CENTRAL SCHOOL DISTRICT, located at:

2. Living with me at the address described above are:
_____ and the person or persons as follows:
a. _____ b. _____
c. _____ d. _____
3. How long will the above persons be living in your home? _____
4. What circumstances brought them to reside with you? _____

5. Telephone number where the family listed in #2 can be reached: _____

To the best of my knowledge and information, the persons named above are residents of the described premises.

6. The foregoing statements are made by me on the knowledge that the information I have given will be used by the MAHOPAC CENTRAL SCHOOL DISTRICT in making determinations of residency based on the accuracy of these statements.

OWNER/RENTER MUST PROVIDE THREE (3) PROOFS OF RESIDENCY ACCORDING TO THE DISTRICT'S RESIDENCY REQUIREMENTS.

ANY FALSE STATEMENT MADE IN THIS APPLICATION IS ALSO PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW.

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

(Signature of Legal Owner/Resident)

(Notary Public)

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