

Williamsport Area School District
1302 Affidavit Guardianship Statement

In accordance with 24 P.S. Section 1302, Resident and Right to Free School Privileges, of PA Public School Code of 1949 as amended;

I, _____, attest that I am a resident of the Williamsport Area School
(Guardian Name)

District residing at _____
(Address) (Phone)

TWO PROOFS OF RESIDENCY ARE REQUIRED FROM THE LIST BELOW

Proof of Residency attached:

- Utility bill
- Driver's License
- Paycheck stub with name and address
- Rental affidavit

Name of Child/Children: _____

Date of birth: _____

Grade: _____

1: What is your relationship to the child/children? _____

2: Why is/are the child/children not living with one or both parents (Optional)? _____

3: Date child(ren) began/will begin to reside in your home? _____

4: Do you intend to keep and support the child(ren) continuously full time, year round, on a 24 hour-basis and not merely through the school year? Yes ___ No ___

5: Will anyone contribute to the child's(ren's) support? Yes ___ No ___ If yes, explain: _____

6: Is there currently a support order for the child(ren) that has been entered by a court or other party? Yes ___ No ___ If yes, to whom are the payments made? _____

7: Who will claim this child(ren) as a dependent for state/federal income tax purposes? _____

8: Will you assume all personal obligations related to school requirements for this child(ren) that may include making all education decisions, providing for required immunizations, uniforms, fees/fines, citation/fines for truancy, attending parent-teacher conferences, attending meetings/hearings concerning discipline, and fulfilling any special education requirements?

Yes ___ No ___

Proof supporting child(ren) gratis attached: (Must be provided after 1st year for child(ren) to remain in district)

- Copy of completed IRS form transferring tax exemption of child(ren) to guardian/lists child as a dependent of guardian
- Copy of completed county form transferring child(ren) support payments to resident
- Copy of completed State form notifying Department of Welfare of child(ren's) new residence
- Copy of insurance card/policy/statement listing child(ren) as eligible for services
- Copy of lease/rental agreement identifying child(ren) as a tenant

Affidavit by Non-Parent Caregiver for School Enrollment

I attest that all information provided here is correct and current. I understand that if residency should change, for any reason, it is the responsibility of the resident to notify the school district and amend the residency affidavit. Any false statements can and will be punishable by law. I further understand and agree that I WILL BE RESPONSIBLE FOR THE ENTIRE COST OF TUITION in accordance with district policy and the Public School Code of 1949 should it be determined that the child/children are improperly or illegally attending the Williamsport Area School District. I understand that any false statements herein are made subject to the penalties 18 Pa. C.S §4904, relating to unsworn falsification for authorities.

Through my notarized signature, I grant the school district permission to investigate the above information that I have presented in this affidavit for confirmation and factual accuracy including tax authorities. I am aware that the information provided in this affidavit may be shared with the IRS, the Pennsylvania Department of Welfare, and the Social Security Administration.

I agree the district reserves the right to re-verify a student's guardianship status periodically and at the beginning of every school year. A new 1302 Affidavit must be provided every school year with the supporting documentation listed above. Failure to provide an updated affidavit and documentation will result in the student being removed from the school district.

Sworn and subscribed before me this _____ day of _____, 20_____

(Proposed Guardian's Signature)

(Notary Public)