



Dublin City School District

Students  
5111 F1c  
Revised 8/26/19  
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## Affidavit for Families Residing with Friends or Relatives

**NOTE: This form is good for the current school year only. You must complete a new form for each school year that you continue to live in the Dublin City School District with friends or relatives.**

- Part I to be completed and signed by the parent.
- Part II to be completed and signed by the owner.
- Completed form to be returned to the Records Compliance Officer.

### PART I – To be completed and signed by the parent/legal guardian

STATE OF OHIO  
COUNTY OF FRANKLIN, SS:

I, \_\_\_\_\_, hereby certify that I have established residency on a seven-days-a-week basis in the Dublin City School District and am not maintaining a separate residence elsewhere. I am aware that Dublin City Schools may use any legal means necessary including, but not limited to, conducting unscheduled home visits to verify that I am living at the address listed below.

I further certify that this residence is located at:

_____	_____	_____
Street		Principal owner of residence
_____	_____	_____
City	Zip Code	Your relationship to owner

I realize that should any of the above statements be false, I am liable under the Criminal Code for any penalties that the law provides. Should any of this information be false I agree to pay the tuition cost of \$67.69 per day per student for the student(s) listed below (\$33.84 per day for kindergarten students) to cover the period during which they illegally attended Dublin City Schools, and **I understand that they will be immediately withdrawn from school.** If I move out of the Dublin City School District, I will immediately notify the Records Compliance Officer and I will withdraw my student(s).

Student Name(s)	School of Attendance
_____	_____
_____	_____
_____	_____

**FOR PARENTS OF ATHLETES**  
I understand that Dublin City Schools athletic teams will be forced to forfeit games when ineligible players who have enrolled under false pretenses are participating on the team.

**Please attach to this form proof of ownership of the home (mortgage statement, print out from the County Auditor’s web site, tax bill/statement, deed) and a current electric, gas, or monthly water bill as proof of residency of the homeowner. Also attach a post-marked envelope that has been sent to you at the above-listed address.**

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Work Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public: \_\_\_\_\_

**PART II – To be completed and signed by the owner**

STATE OF OHIO  
COUNTY OF FRANKLIN, SS:

I, \_\_\_\_\_, hereby certify that I am the owner of the house/condo located at:

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City)

I, \_\_\_\_\_, further certify that the following persons actually reside at this property, and to the best of my knowledge are not maintaining a separate residence elsewhere. I realize that should any of my statements be false, I may be liable for any penalties that the law provides under the Criminal Code.

Parent/Guardian and Child(ren)'s Names

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am aware that the Dublin City School District may use legal means to verify my residency including, but not limited to, conducting unscheduled home visits. I agree to allow the release of housing information, and also utility customer information, to a representative of the Dublin City School District.

The signer of this Part II must own the property located at the above address. If the signer does not own the property, this affidavit is null and void.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Home Phone Number

\_\_\_\_\_  
Work Phone Number

\_\_\_\_\_  
Cell Phone Number

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public: \_\_\_\_\_