

(seal)

Board of Education 1000 Edgewood Dr. Marysville, OH 43040 Office 937-578-6100

Fax 937-578-6113

RESIDENCY AFFIDAVIT FOR OPEN ENROLLED STUDENTS FOR THE PURPOSE OF ESTABLISHING SCHOOL RESIDENCY

TO BE COMPLETED BY PARENT/LEGAL GUARDIAN

reside at all times, including eating and sl	City		Zip Code above address: (Please print)
that I am the residential parent/legal gu	D.O.B	es of the following student(s) living at the School/Grade	
that I am the residential parent/legal gu	D.O.B	School/Grade	above address: (Please print)
	D.O.B	School/Grada	
		School/Grade	_
	D.O.B	School/Grade	
of students currently enrolled in the Mary	ysville Exempted Village So	chools (including child(ren) being enrolled	I):
that:			
			ate of Ohio or the policies of the
change my present address to another add	ress within the boundaries o	of the Marysville Exempted Village School Dis	trict, I will <u>immediately</u> file a new
nderstand and agree that if the above noted	l address ceases to be my leg	gal residence and my new legal residence is lo	
nderstand and agree that if I cease to be the child(ren) attend <u>immediately</u> and understa	and that my child(ren) will b	e withdrawn at that time. Failure to do so wi	
fail to withdraw my child(ren) and /or it is <u>a</u> rrysville Exempted Village School District, I u r, and agree to pay, the current full tuition ra	t any time discovered by the inderstand that my child(rerete to the Treasure of the Marete to the Treasure of the Marete to the	Administration of the Marysville Schools than) will be withdrawn from the Marysville Scho arysville Exempted Village School District pur	ools. I also agree to be responsible suant to R.C. 3317.08 of the Ohio
ırther understand that should I fail to pay th	e full tuition rate as outlines		
n front of notary)		Date:	
(Parent/Legal Guardia	an)		
E PRINT:		Date:	
e a (iii n p f f r r, v ur la	information above is true, accurate, and noted of Education requiring legal residency in change my present address to another add dency affidavit that includes the updated a derstand and agree that if the above noted rysville Exempted Village School District, I was per district of residence. derstand and agree that if I cease to be the child(ren) attend immediately and underst periods of time the child(ren) was illegally ending the withdraw my child(ren) and /or it is a rysville Exempted Village School District, I wand agree to pay, the current full tuition raised Code for any period of the school year ther understand that should I fail to pay the content of my difference owed for the illegal enrollment of my definite front of notary)	information above is true, accurate, and not made for the purpose of or dof Education requiring legal residency in order to attend the Marysvi change my present address to another address within the boundaries of dency affidavit that includes the updated address with the school build derstand and agree that if the above noted address ceases to be my legalized by the per district of residence. I will withdraw my child(ren) find per district of residence. I will withdraw my child(ren) and understand that my child(ren) will be periods of time the child(ren) was illegally enrolled in the Marysville School in the withdraw my child(ren) and lor it is at any time discovered by the residence to pay, the current full tuition rate to the Treasure of the Maised Code for any period of the school year or school years that my child ther understand that should I fail to pay the full tuition rate as outlines ance owed for the illegal enrollment of my child(ren). I PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT: PRINT:	information above is true, accurate, and not made for the purpose of circumventing the attendance laws of the Stard of Education requiring legal residency in order to attend the Marysville Exempted Village Schools. Change my present address to another address within the boundaries of the Marysville Exempted Village School Distidency affidavit that includes the updated address with the school building(s) which my child(ren) attend(s). derstand and agree that if the above noted address ceases to be my legal residence and my new legal residence is longysville Exempted Village School District, I will withdraw my child(ren) from the Marysville Exempted Village Schools per district of residence. derstand and agree that if I cease to be the child(ren)'s residential parent/legal custodian for school purposes, I will child(ren) attend immediately and understand that my child(ren) will be withdrawn at that time. Failure to do so will veriods of time the child(ren) was illegally enrolled in the Marysville Schools. Tail to withdraw my child(ren) and /or it is at any time discovered by the Administration of the Marysville Schools that rysville Exempted Village School District, I understand that my child(ren) will be withdrawn from the Marysville School and agree to pay, the current full tuition rate to the Treasure of the Marysville Exempted Village School District pursised Code for any period of the school year or school years that my child(ren) were illegally enrolled in the Marysville ther understand that should I fail to pay the full tuition rate as outlines in Section (5), I may be sued in a court of law ance owed for the illegal enrollment of my child(ren). Date: (Parent/Legal Guardian) Date: (Parent/Legal Guardian)

Notary public _



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RESIDENCY CERTIFICATION TO BE COMPLETED BY PERSON WITH PROOF OF RESIDENCE

l,		by certify that I am the perso	n with proof of
residence for the following	g address:		
 Street Address	 		
which is located within the	geographic boundaries of the	•	School District.
I hereby certify that the above address at all tin	nes	and his/her family p	resently reside at
They began residing at the	above address on	·	
significant period of time in receiving mail, relaxing and I understand that my failur	ate of Ohio, residency for school purposen a dwelling and conducting regular dailed leaving from and returning to after worke to complete this Residency Certification criminal liability in a court of law.	ly activities there such as eat ork.	ing, sleeping,
,	- Attached hereto is a copy of my PROC		ed by
	the Marysville Exempted Village S	School District.	
SIGN (in front of Notary)			
Date:			
County of State of Ohio) ss:		
Attested to and su	bscribed in my presence thisday o	of, 2	20
(Seal)	Notary public		