

## Pickerington Schools Shared Residency Affidavit

***This form is valid for the 2023-2024 school year only. A new form must be submitted every year. Renewals must be received in this office no later than August 1, 2023.*** Use this form to certify that you have established residency within the Pickerington Schools district and are not maintaining a separate residence elsewhere. Submit this form and its supporting documentation to Welcome Center, 130 Hill Rd S, Suite 102, Pickerington, OH 43147. Contact the Welcome Center at **phone** 614-920-6180, **fax** 614-835-2088, **email** [welcome\\_center@plsd.us](mailto:welcome_center@plsd.us)

**PART I – To be completed and signed by the parent/guardian\***

STATE OF OHIO, COUNTY OF FAIRFIELD, SS:

I, \_\_\_\_\_, hereby certify that I have established residency on a seven-day-a-week basis in the Pickerington Local School District and am not maintaining a separate residence elsewhere. "Residence" in Ohio law means "...a place where important family activity takes place during significant parts of each day; a place where the family eats, sleeps, works, relaxes, plays." I am aware that the Pickerington Local School District 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:**

Address \_\_\_\_\_ Residence Owner \_\_\_\_\_

City and zip \_\_\_\_\_ Your relationship to owner \_\_\_\_\_

Phone \_\_\_\_\_

**\*The parent/guardian must show a valid government ID. The address on the government ID must match the address in the Pickerington Local Schools District where the parent/guardian resides.**

I realize that should any of the above statements prove to 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 a tuition cost of \$35.90 per day per student for the student(s) listed below to cover the period during which they illegally attended the Pickerington Local School District. I understand if I move out of the Pickerington Local School District, I will immediately notify the District Representative at the Welcome Center, and I will withdraw my student(s). \_\_\_\_\_ **Parent initials** acknowledgement and understanding. **Please list your student(s) below:**


**JUNIOR HIGH/HIGH SCHOOL EXTRACURRICULAR ACKNOWLEDGEMENT:** I acknowledge and understand that if my son/daughter participates in PLSD extracurricular activities, I must speak to the Athletic Director at my child's school as soon as possible to complete all required paperwork for athletic eligibility with the OHSAA. I further understand that if my student athlete enrolls and participates under false pretenses, Pickerington athletic teams may be forced to forfeit games based on playing an ineligible player. **Please initial acknowledgement:** \_\_\_\_\_

Please provide the following items: **Parent/Guardian – Two (2) pieces of mail** (Examples: letter from employer that indicates the address used for employment purposes, current IRS W-2 forms, mail from the Department of Job & Family Services, paystub, CareSource/Molina, Social Security, credit card statement, bank statement, cell phone bill).

Parent/guardian signature \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

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

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

<sup>1</sup> **This is a two part form. Both Part I and Part II must be completed and submitted to the Welcome Center.**



# Pickerington Schools Shared Residency Affidavit

## PART II – To be completed and signed by the owner of the residence

STATE OF OHIO  
COUNTY OF FAIRFIELD, 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 Name(s)	Student Name(s)

I am aware that the Pickerington Local 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 utility customer information to a representative of the Pickerington Local School District.

\_\_\_\_\_  
Signature of residence owner

\_\_\_\_\_  
Printed name of residence owner

\_\_\_\_\_  
Phone number

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

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

**Knowingly making a false statement for the purpose of enrolling a student without tuition is a criminal offense (O.R.C. 2913.02 Theft by Deception/O.R.C. 2913.13 Falsification) and may be punishable as a felony according to the amount of tuition owed.**