

PICKERINGTON LOCAL SCHOOL DISTRICT

Shared Residency Affidavit

Annual Renewal Form

This form is good for the current school year only and must be renewed each year no later than August 1st.

The guardian must provide this notarized form and required documents to:

Welcome Center
130 Hill Road South
Pickerington, OH 43147

Phone: 614-920-6180
Fax: 614-833-2114
Email: 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:

Street Address
City and Zip Code
Phone Number

Principal Owner / Leaseholder of Residence
My Relationship to Owner / Leaseholder of Residence

Parent/Guardian must show a valid Government ID, and the address on the Government ID must match the address in the Pickerington Local Schools 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 the 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 of acknowledgement and understanding.)

Table with 2 columns and 3 rows for Student Names.

PARENTS OF JR. HIGH/HIGH SCHOOL ATHLETES: Do you plan to have your son/daughter participate in PLSD extracurricular activities? If yes, please ask for and complete the "Affidavit of Bona Fide Legal Change of Residence." (I understand if my student athlete enrolls and participates under false pretenses, Pickerington athletic teams will be forced to forfeit games based on playing an ineligible player.) Circle: YES NO 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, car insurance dec, credit card statement, bank statement, cell phone bill).

Parent/Guardian Signature Home Phone Work Phone

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 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)

Homeowner / Leaseholder – Please provide one of the following items: Current mortgage statement or coupon, rental agreement signed by the landlord and leaseholder(s). If the home is paid off, please provide the deed.

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 Owner of Residence

Printed Name of Owner of Residence

Phone Number

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

Notary Public _____

*****WARNING*****

**The yearly tuition rate for Pickerington Local School District is: \$6,436.84 (\$35.90 per day).
Knowingly making a false statement on this form for the purpose of enrolling a child without tuition is a criminal offense as follows:**

**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.