



PENNSBURY SCHOOL DISTRICT
FALLSINGTON, PENNSYLVANIA

AFFIDAVIT
 RENEWAL OF AFFIDAVIT

SCHOOL YEAR: _____ STUDENT NUMBER: _____

CHILD'S NAME (Last, First, Middle Initial): _____

Name of guardian taking child into their home: _____

Address of guardian: _____ Phone: _____

Relationship to child: _____

Child's school (Pennsbury): _____ Grade: _____

Name of child's natural parents: _____

Address of natural parents: _____

Phone number of natural parents: _____

Reason that child is living with someone other than parent: _____

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF BUCKS

_____, being duly sworn according to law depose(s) that I (we) presently reside at _____; and that I (we) am (are) supporting _____ gratis; that I (we) will assume all personal obligations related to any and all school requirements; that I (we) intend to keep and support _____ continuously and not merely through the school term; and that the facts set forth herein are true and correct to the best of my (our) knowledge, information and belief; and that I (we) am (are) aware that false swearing is a misdemeanor of the third degree and that the punishment therefore is a fine of not more than \$2,500 or imprisonment for not more than one year or both. I (we) further certify that I (we) will notify the Pennsbury School District immediately in the event that the facts set forth herein shall no longer be correct or shall change. I (we) certify that I (we) will cooperate with and be responsive to requests for information or investigation concerning the continuing validity of this Affidavit.

Signature

Witness

Date of Signature

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

Notary Public