

RESIDENT

Lakota Residence Affidavit I & II

I, _	, being duly cautioned, certify the following:		
1.	1. I am the owner/renter of the residence at		
	, OH, Phone number:		
	located in the Lakota Local School District.		
2.	The following individual(s)		
	Name of Parent/Guardian		
	Name of Student(s)		
	is/are living at my above-stated residence and have since		
	Date		
s ir c	I acknowledge and understand that falsification of the above information regarding legal residency and subsequent enrollment in the Lakota School District is a theft of Service. If it is determined that the above information is falsified, I become responsible for tuition to the Lakota Local School District and subject to criminal or civil charges which may be filed by the Lakota School District. (ORC Section 2921.13) I agree that the Lakota Local School District, if they deem necessary, has the right to investigate my residency. I offer proof of residency by copy of one of the following: mortgage statement, deed, settlement statement, current real estate tax bill, or rental/lease agreement. I have read and understand the consequences of falsifying residency information. (Initials)		
-			
	Resident Signature Date		



OCCUPANT

Lakota Residence Affidavit II

ł,, being duly cautioned, certify the following:		
I am the parent, guardian, or legal custodian of		
and I live at		
	, OH	
Phone number:	Relationship to Resident:	
his has been my place of residence since		
Ny address immediately prior to this date was _		
ormation is falsified, I become responsible for minal or civil charges which may be filed by the gree that Lakota Local School District, if they dree to allow the release of rental information to termined that I am not a resident of the Lakota hdrawn from the Lakota Local School District. I have read and understand the constitution.	District is a theft of service. If it is determined that the above tuition to the Lakota Local School District and subject to Lakota School District. (ORC Section 2921.13) eem necessary, has the right to investigate my residency. If a representative of the Lakota Local School District. If it is Local School District, I understand that my child(ren) will be sequences of falsifying residency information.	
Please check True or False for each statement below:		
True False The above address is will frue False There is no other address True False I do not own a house out True False I do not rent/lease a hout True False I am not provided with live	nere I eat and sleep overnight the majority of the time. There my child(ren) eats and sleeps the majority of the time. The swhere my child(ren) sleeps overnight on a regular basis. The side the Lakota Local School District. The se or apartment outside the Lakota Local School District. The space outside the Lakota Local School District by a ment agency.	
If you marked FALSE on any of the above stat	ements, please explain:	
arent/Guardian Signature:	Date	
	am the parent, guardian, or legal custodian of and I live at	