

# Bradford Area School District

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*"No member of our team is more important than the students we serve."*

## SWORN STATEMENT BY RESIDENT UNDER §13-1302

### (TO BE COMPLETED BY RESIDENT ONLY)

#### Education of Children Residing With an Adult Other Than Natural Parent

**Instructions:** This Sworn Statement is valid for the current year only and must be resubmitted at the beginning of every school year. If the potential student is living, or will be living, in a household with two resident adults who will assume responsibility for the student, both residents must complete and sign this statement and it must be Notarized.

**This is a legal document. You may ask to see a copy of 24 P.S. §13-1302 prior to signing this document, and consult with an attorney if you have any questions or do not understand any portion of this document.**

1. Your Name \_\_\_\_\_ Name of Spouse \_\_\_\_\_  
Home Address \_\_\_\_\_  
Home Telephone Number \_\_\_\_\_ Work Number \_\_\_\_\_
2. Do you live in the Bradford Area School District and does the child live with you? Yes \_\_\_\_\_ No \_\_\_\_\_  
Date child began/will begin to reside in your home? \_\_\_\_\_
3. Child's Full Name \_\_\_\_\_  
Birth Date \_\_\_\_\_ Grade \_\_\_\_\_  
Name & Address of Last School Attended \_\_\_\_\_  
\_\_\_\_\_  
Parent/s Name/s: \_\_\_\_\_
4. Do you intend to keep and support the child continuously and not merely through the school term?  
Yes \_\_\_\_\_ No \_\_\_\_\_
5. Are you supporting the child gratis (without personal compensation or gain)? Yes \_\_\_\_\_ No \_\_\_\_\_  
*A resident's receipt of public payments, such as Supplemental Security Income (SSI), Transitional Assistance for Needy Families (TANF), pre-adoptive support or other payments for or on account of the child, shall not be deemed to be personal compensation or gain.*  
If no, explain. \_\_\_\_\_
6. Will you assume all personal obligations related to school requirements for this child that may include providing for required immunizations, uniforms, fees/fines, citations/fines for truancy, attending parent-teacher conferences, attending meetings/hearings concerning discipline, and fulfilling any special education requirements? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Will you assume the responsibility and obligation for making all education decisions? Yes \_\_\_\_\_ No \_\_\_\_\_

Through my/our notarized signature/s, I/We grant the Bradford Area School District School District permission to investigate the information presented in this statement by discussing the presented information with all appropriate parties, as necessary, to confirm the factual accuracy. The School District, pursuant to guidelines issued by the Department of Education and District written policy, may require other reasonable information to be submitted to confirm this sworn statement.

Signed By Resident

X \_\_\_\_\_

Signed By Resident

X \_\_\_\_\_

**And notarized**

*Sworn to and subscribed*

*Before me this \_\_\_\_\_ day*

*Of \_\_\_\_\_, 20\_\_\_\_*

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

**NOTICE OF PENALTY FOR PROVIDING FALSE INFORMATION**

**PER 24 P.S. §13-1302, A PERSON WHO KNOWINGLY PROVIDES FALSE INFORMATION IN THIS SWORN STATEMENT FOR THE PURPOSE OF ENROLLING A CHILD IN A SCHOOL DISTRICT FOR WHICH THE CHILD IS NOT ELIGIBLE COMMITS A SUMMARY OFFENSE AND SHALL, UPON CONVICTION FOR SUCH VIOLATION, BE SENTENCED TO PAY A FINE OF NO MORE THAN THREE HUNDRED DOLLARS (\$300) FOR THE BENEFIT OF THE SCHOOL DISTRICT IN WHICH THE PERSON RESIDES OR TO PERFORM UP TO TWO HUNDRED FORTY (240) HOURS OF COMMUNITY SERVICE, OR BOTH. IN ADDITION, THE PERSON SHALL PAY ALL COURT COSTS AND SHALL BE LIABLE TO THE SCHOOL DISTRICT FOR AN AMOUNT EQUAL TO THE COST OF TUITION CALCUALTED IN ACCORDANCE WITH SECTION 2561 OF THE PUBLIC SCHOOL CODE DURING THE PERIOD OF ENROLLMENT.**