

AVON GROVE SCHOOL DISTRICT

Annual Application Process In Regard To Non-Resident Pupil Living With A Resident Family

Step I:

The following documents will constitute a Guardianship Application by an Avon Grove resident to function in the place of a parent for school purposes on behalf of a non-resident pupil. The application and the notarized affidavit of support should be completed and returned to the Director of Pupil Services, 375 South Jennersville Road, West Grove, PA 19390.

If the application is not approved, the pupil will have to attend the school district of resident of his/her parents.

Upon receiving and reviewing the Guardianship Application, the Director of Pupil Services will determine the accuracy of all information supplied in the application.

Step II:

The Director of Pupil Services completes the Determination Form.

Step III:

The school district monitors and audits the residency agreement by means of periodic home visits or other means.

ANNUAL APPLICATION RENEWAL

*Application process needs to be completed on an annual (school year) basis.

AVON GROVE SCHOOL DISTRICT
GUARDIANSHIP APPLICATION

Name of Pupil _____ Age _____

Date of Birth _____ Grade Entering _____

Father's Name _____ Address _____

School District of Residence _____

Mother's Name _____ Address _____

School District of Residence _____

Name of Person Submitting Application _____

Address _____

Relationship to Pupil _____

Are you at least 18 years of age? _____

Are you the court appointed legal guardian of the pupil? _____ (If yes, please attach documentation.)

Will the pupil reside with you on a full-time basis? _____

Will the pupil reside elsewhere on weekends and/or during the summer? If so, where? _____

Will the pupil reside with you in order to meet the Avon Grove School District residency requirement? _____

Length of time pupil will reside with you _____

Will you receive room, board, payment, support or other consideration? _____

If so, from whom? _____

Who will claim pupil as dependent for IRS purposes? _____

*Copy of completed IRS form transferring tax exemption of child to resident, or Copy of Federal or State Tax form which lists child as a dependent of resident is required.

AVON GROVE SCHOOL DISTRICT
Affidavit of Support

I/WE _____ being duly sworn to law
dispose and say that we are residents of the Avon Grove School District being residents of
(address/municipality) _____

THAT we have a resident in our home, _____ (the pupil),
born _____ and in grade/school, _____
child of _____,
whose address(es) is/are _____

THAT the pupil is being supported continuously by the undersigned, and not merely through the school term;

THAT I/we are not receiving any support funds from any other source;

THAT the pupil is a full time resident in our home;

THAT I/we will claim the pupil as a dependent for tax purposes as per IRS guidelines and that the pupil's parents
relinquish such claim to his/her dependency;

THAT I/we agree to supply the Avon Grove School District with our tax records on an annual basis in order to
demonstrate proof of our continued full support of the pupil;

THAT I/we agree to submit affidavits at the start of every school year in which the pupil enrolled in the Avon Grove
School District and is being supported by us pursuant to the terms of this agreement;

THAT I/we will notify the Avon Grove School District, in writing, as soon as the conditions of residence of the pupil are
no longer current.

THAT I/we intend to assume all personal obligations for the pupil relative to school requirements;

THAT I/we recognize the following:

NOTWITHSTANDING ANY OTHER PROVISION OF LAW TO THE CONTRARY, A PERSON WHO KNOWINGLY PROVIDES FALSE INFORMATION IN THE 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 AND 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 CALCULATED IN ACCORDANCE WITH SECTION 2561 OF THE PUBLIC SCHOOL CODE DURING THE PERIOD OF ENROLLMENT.

THAT I/we have been acquainted with Section 1302 of the Public School Code of 1949, as amended; and

THAT I/we have read that section and are familiar with it and understand the provisions of that section.

[THE REST OF THIS PAGE IS INTENTIONALLY LEFT BLANK]

I VERIFY THAT STATEMENTS MADE IN THIS AFFIDAVIT ARE TRUE AND CORRECT AND THAT FALSE STATEMENTS HEREIN MADE ARE SUBJECT TO THE PENALTIES UNDER THE LAW REGARDING SWORN FALSIFICATIONS.

GUARDIAN: _____

Address: _____ Phone: _____

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

Notary Public _____

GUARDIAN: _____

Address: _____ Phone: _____

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

Notary Public _____

Copies: File