CHANGE OF ADDRESS WITHIN OUR DISTRICT

| Student's Name | | | Birth Date | | Grade | Sex |
|-----------------------------|--|---|---------------------------------------|--|------------------|--------------------|
| <u>LEGAL</u> | _ ADDRESS | | | | | |
| Numb | er Street | | | | Telepl | none/Home/Cell |
| City | | | State | Zip | Telepl | none/Work |
| the Jac the loc TO FR | ckson-Milton L cation at which AUD CHARGES | ve named student, ocal School District in you and the child TO FALSIFY RESIDE | , and we resi sleep and ea NCY. | de at the address t most meals. IT IS | indicated. Resid | ency is defined as |
| the ch | ange. | changed or been up ach photocopies of | | | - | |
| | Column 1 | | | Colun | <u>nn 2</u> | |
| 1. 2. 3. 4. 5. | House Closing Papers Deed Mortgage Documents Building Permit Rental Agreement/Lease Notarized Parent Residency Affidavit (on back) | | | Two currer Two currer Drivers Lice Tax statem | nts | |
| FOR O | FFICIAL USE-TO | D BE COMPLETED E | SY SCHOOL AI | <u>DMINISTRATOR</u> | | |
| APPRC | OVED FOR ENR | OLLMENT | TEN | 1PORARY APPROV | AL | |
| School |] | | Signature of | Administrator | | Date |

| State o | of Ohio |) | • | | 37 | | | | |
|------------|--|-------------------|-----------------|--|------------|--|--|--|--|
| Count | y of Mahoning |) :SS) | | | | | | | |
| | 14 | | , having | been duly swom | and | | | | |
| epose | ed, hereby state and affir | m the following: | | | | | | | |
| . 3 | I am the parent of | ř. | | ······································ | | | | | |
| 2. | I have legal custody of my above-named child, and s/he presently resides with me. | | | | | | | | |
| 3. | My "legal residence" (address) is | | | | | | | | |
| | (Street Number and St | reet) | (City) | (State) | (Zip Code) | | | | |
| 1 . | For purpose of Affidavit, I intend the term "legal residence" to refer to the location where I eat my meals, sleep on a regular basis, receive my mail, and, if applicable, where I am registered to vote. | | | | | | | | |
| ;. | I am the owner/lessee of the address specified above. | | | | | | | | |
| 5. | The address specified above is within the Jackson-Milton Local School District | | | | | | | | |
| | Ÿ | v | | | | | | | |
| | FURTHER AFFIANT | SAYETH NAUC | SHT. | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | VI | Affiant | | | | |
| | | ii: | | | | | | | |
| | Sworn to before me an 20 . | d subscribed in m | y presence this | day of | | | | | |
| | | | Sec. 35/3 | 7 | | | | | |
| | | | | Notary Publi | c | | | | |
| | | 10.4 | | 140th J 1 min | | | | | |

NOTICE: READ CAREFULLY - Knowingly falsifying this document is a violation of Ohio Revised Code Section 2921.13(A) which is a FIRST DEGREE MISDEMEANOR punishable by a prison term of six (6) months and/or a fine of up to \$1000.00. Further the Affiant will be charged (and presecuted in court, if necessary) to collect all back tuition to the Jackson-Milton Local Schools for all days my child(ren) illegally attended school.