

**SOUTH WILLIAMSPORT AREA SCHOOL DISTRICT  
AFFIDAVIT OF MULTIPLE OCCUPANCY REGISTRATION**

(Note: Must be completed by legal owner and lessee AND notarized)

**\*Forms of ID along with proof of property ownership must be provided showing the South Williamsport area address.**

I, \_\_\_\_\_ can certify that I am the legal owner/lessee of the property located at \_\_\_\_\_  
(Street address/apartment number/Zip/Borough)

I further affirm that the following individual(s) are living on a continuous, permanent basis at the above address with the following child(ren). Permanent living includes change in driver's license, voter registration, and other personal documentation to represent new address. I am providing proof of residence with the return of this packet. I assume the responsibility for notifying the school district should the above described circumstances change. **I understand that if any information proves to be incorrect, the South Williamsport Area School District has the right to reject the application and remove the student from any South Williamsport Area School, in addition to collecting tuition charges for the time the child was enrolled.**

Name of Child(ren) <i>(Please print)</i>	South Williamsport School & Grade <i>(Please print)</i>

I verify that this address is located within the boundaries of the South Williamsport Area School District. I assume responsibility for notifying the building principal of the school(s) above should the above described circumstances change. Failure to inform the South Williamsport Area School District could result in tuition and legal costs.

I do hereby give the South Williamsport Area School District authorization to contact any/all of the following to verify residency, dependency and authenticity of information given on the MULTIPLE OCCUPANCY forms:

- Internal Revenue Service      • Welfare Agency      • US Postal Service
- Employer      • Bureau of Motor Vehicles      • Current/Previous Landlord

I acknowledge that the district will contact me periodically to provide multiple occupancies/addresses.

Parent/Guardian *(Please print)*: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Home Phone: \_\_\_\_\_

*(If single parent please provide the other parents' name, address, and phone.)*

**\*This section is to be filled out by the South Williamsport Area property owner and lessee.**

**\*Forms of ID must be provided showing the South Williamsport area address.**

\_\_\_\_\_  
Property Owner *(Please print)*

\_\_\_\_\_  
Property Owner *(Please Sign)*

\_\_\_\_\_  
Property Owner Address, City, State, Zip

\_\_\_\_\_  
Property Lessee *(Please print)*

\_\_\_\_\_  
Property Lessee *(Please Sign)*

COMMONWEALTH OF PENNSYLVANIA  
COUNTY OF \_\_\_\_\_

Sworn to and Subscribed before me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

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