

**Walnut Township Local Schools
Residence Affidavit**

(Complete this form only if you have no other proof of residence)

I, _____, first being duly sworn, state that I reside in the
(Applicant's Name)
Walnut Township School District at _____, _____,
(Residential Address) (P.O. Box)
_____, Ohio _____. I certify that the following persons reside at this property:
(City) (Zip)

I, _____, further certify that the above information is accurate
(Applicant's Name)
and true. Should any of this information be false, I am liable for any penalties which the law provides
under the criminal code and I agree to pay tuition cost of \$ _____, per month for each student
enrolled while illegally attending the Walnut Township School District and understand that immediate
withdrawal will occur.

I, _____, certify that I am the owner/tenant of the above
(Owner/Tenant Name)
shown address and that the above information is accurate and true. Should any of this information be
false, I am liable for any penalties which the law provides under the criminal code.

(Signature of Applicant)	(Printed Name of Applicant)	(Phone)
(Signature of Owner/Tenant)	(Printed Name of Owner/Tenant)	(Phone)
(Signature of Person Enrolling Child)	(Printed Name of Person Enrolling Child)	(Relationship to Child)

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(Must be signed in the presence of a notary)

I swear that the above information is correct to the best of my knowledge.

(Signature of Applicant)

Sworn to and subscribed in my presence this _____ day of _____, _____.
(Month) (Year)

(Signature of Notary)