

**CRANFORD PUBLIC SCHOOLS  
Cranford, New Jersey**

**AFFIDAVIT OF RESIDENCY**

Date: \_\_\_\_\_

\_\_\_\_\_  
(Name of Resident Parent)

\_\_\_\_\_  
(Legal Address)

hereby make affidavit for my son/daughter \_\_\_\_\_  
to attend the Cranford Public Schools.

I, \_\_\_\_\_, make this Affidavit that I am  
a legal resident of Cranford, New Jersey, in accordance with N.J.S.A. 18A:38-1  
and the Rules and Regulations of the Commissioner of Education.

I, reside at \_\_\_\_\_, in the Township of  
Cranford, County of Union. My home telephone number is  
\_\_\_\_\_.

I understand that I am responsible for the tuition in the amount which is  
determined annually by the Cranford Board of Education should the conditions  
set forth in N.J.S.A. 18A:38-1 be determined to have been violated.

**I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I  
UNDERSTAND THAT IF ANY OF THE FOREGOING STATEMENTS ARE WILLFULLY FALSE, I  
AM SUBJECT TO PUNISHMENT AND/OR REPAYMENT OF TUITION.**

\_\_\_\_\_  
(Signature of Resident Parent)

Sworn and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

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

Revised 06/2004