Mount Union Area School District 603 North Industrial Drive Mount Union, PA 17066 (814)542-8631 Fax (814)542-8633

RESIDENCY AFFIDAVIT 24PS §13-1302

I/We attest that all information provided here is correct and current. I/We understand that if residency should change, for any reason, it is the responsibility of the resident to notify the school district and amend the residency affidavit. Any false statements can and will be punishable by law.

I/We,	, currently reside at
Address	
Twp/Boro	
Telephone Number	Work Number
Homeowner's Verification	
Homeowner's name	Telephone Number
Approval has been granted for	who reside(sleeps at
$\overline{(C)}$	who reside(sleeps at hilds Name)
night in this residence) with	, at the address identified above.
(Re	, at the address identified above.
Homeowner's signature	Date
Landlord Verification	
Landlord's name	Telephone Number
Approval has been granted for	who reside(sleeps at
(C	hilds Name)
night in this residence) with	, at the address identified above.
Landlord's signature	Date
	We grant the school district, permission to investigate the presented in this affidavit for confirmation and factual
Signed by resident(s) and notarize	
Date	

Any willful false statement made above shall be a misdemeanor of the third degree.