



Washington Township Public Schools

Registration Office

Eileen Abbott Central Administration Building

206 E. Holly Avenue, Sewell, NJ 08080

(856) 589-6644

Landlord Certification Part I – Property Manager

To be completed by the landlord when the child and his parent/legal guardian are residing in a dwelling managed by that landlord in the Washington Township School District without a written lease. The Landlord Certification Part II - Parent/Legal Guardian must also be completed.

CHILD/CHILDREN: _____

LANDLORD/PROPERTY MANAGER: _____

I, _____, hereby certify to the following:
(Name of Landlord/Property Manager)

1. My telephone number is _____.
2. My mailing address is _____.
(Street Address, Apt. #, City, State, Zip Code)
3. I am the Landlord/Property Manager of (Name of Building/Complex)
located at _____.
(Street Address, Apt. #, City, State, Zip Code)
4. _____ and the child/children have resided at the building
(Name of Parent/Legal Guardian)
listed above at unit _____ under an unwritten lease since _____.
(Date)
5. The unwritten lease expires on _____.
(Date)
6. The parent and child live with tenant(s) _____.
(Names of Tenants Listed on Lease)
7. I understand that it is a violation of N.J.S.A. 18A:38-1(c) for a person to fraudulently allow a child of another person to use his residence and who is not the primary financial supporter of that child. A person also violates N.J.S.A. 18A:38-1(c) when

he fraudulently claims to have given up custody of his child to a person in another school district.

8. ***I declare that the student is not domiciled at this address for the sole purpose of attending the Washington Township Public Schools. I understand that to falsify such information constitutes a Disorderly Persons Offense with penalties up to and including the cost of the student's tuition. (Tuition rates are dependent on the student's academic program and range from \$80 to over \$300/day).***
9. When the child/children and/or parent/legal guardian no longer resides at the address listed in Paragraph 3, I will immediately notify the Central Registration Office of the Washington Township School District.
10. I affirm that the information provided and the statements made in this Certification are true.

(Signature of Landlord/Property Manager)

(Date)

(Printed Name of Landlord/Property Manager)

NOTARY

Sworn to and subscribed

this _____ day of
_____, 20____.
(Month)

(Notary Signature)



Washington Township Public Schools

Registration Office

Eileen Abbott Central Administration Building

206 E. Holly Avenue, Sewell, NJ 08080

(856) 589-6644

Landlord Certification Part II – Parent/Legal Guardian

*To be completed by the child's parent/legal guardian residing as a tenant without a written lease in a dwelling managed by the landlord/property manager who completed Landlord Certification Part I – Landlord/Property Manager in the Washington Township School District.
The Landlord Certification Part I – Landlord/Property Manager must also be completed.*

CHILD/CHILDREN: _____

PARENT/LEGAL GUARDIAN: _____

I, _____, hereby certify to the following:
(Name of Parent/Legal Guardian)

1. My telephone number is _____.

2. My mailing address is _____.
(Street Address, Apt. #, City, State, Zip Code)

3. I am a tenant of _____
(Name of Building/Complex)

located at _____.
(Street Address, Apt. #, City, State, Zip Code)

4. My child/children and I have resided at the building listed above at unit _____
under an unwritten lease since _____.
(Date)

5. The unwritten lease expires on _____.
(Date)

6. My child/children and I live with tenant(s) _____.
(Names of Tenants Listed on Lease)

7. I understand that it is a violation of N.J.S.A. 18A:38-1(c) for a person to fraudulently allow a child of another person to use his residence and who is not the primary financial supporter of that child. A person also violates N.J.S.A. 18A:38-1(c) when

he fraudulently claims to have given up custody of his child to a person in another school district.

8. When my child/children and I no longer reside at the address listed in Paragraph 3, I will immediately notify the Central Registration Office of the Washington Township School District.

9. *I understand the residency requirements of the Washington Township School District and I acknowledge that the initial determination of eligibility is subject to more thorough review. Should a residency investigation find that I have registered my child under false pretenses, I will be held liable for tuition and my child will be removed from the rolls.*

10. I affirm that the information provided and the statements made in this Certification are true.

(Signature of Parent/Legal Guardian)

(Date)

(Printed Name of Parent/Legal Guardian)

NOTARY

Sworn to and subscribed

this _____ day of
_____, 20____.
(Month)

(Notary Signature)