

5117.1

ADMISSION OF RESIDENT STUDENTS

In accordance with state law, the district shall provide a public education to all persons between the ages of five and 21 who have not received a high school diploma and are entitled to attend school. If such persons reside in the district, they may attend without payment of tuition.

Resident student shall mean:

- Every non-emancipated child of school age who resides with a person in parental relation as defined by Education Law Section 3212, where such person in parental relation is a resident of the district;
- Every duly emancipated child of school age who maintains his or her only actual bona fide residence within the district; or
- Every child deemed to be a resident of this district pursuant to express mandate of Education Law Section 3202, or pursuant to the express mandate of any other Statute of the State of New York.

For resident students to attend district schools, **three** proofs of residency shall be required as follows:

1. A mortgage or closing statement, a deed, a notarized signed lease, or a notarized rent receipt for a home in the district and any **two** of the following:
 - Suffolk County tax bill
 - Telephone bill
 - LIPA bill
 - Water bill
 - Oil company bill
 - Insurance bill
 - Driver's license
 - Bank statement
 - Voter registration card
2. In addition to the above, a person other than a natural parent, but in parental control, must present one of the following:
 - Court issued legal guardianship papers
 - Court order granting custody
 - Court appointment as foster parent
 - Affidavits provided by the parent surrendering control and the person in parental relationship assuming legal responsibility for the student
3. In addition to the above, students claiming emancipation shall be required to submit their own affidavit and an affidavit from their parent where deemed appropriate.

4. A copy of all proofs of residency provided for resident students shall be made part of the student's permanent record and a copy kept in the student's file.

In addition to proof of residency and parent control, all new registrants at the time of registration must submit a birth certificate and medical records as required by policy #5117, School Admissions. *

*** See Policy #5120 for registration requirements of homeless students.**

Any exceptions to the information required upon registration require the approval of the Superintendent of Schools or either the Assistant Superintendent for Elementary or Secondary Education, subject to action by the Board of Education.

Cross-ref: Policy #5117 -School Admissions
 Policy #5118 -Admission of Non-resident Students
 Policy #5118.2 -Admission of Foreign Students
 Policy #5120 -Admission of Homeless Students

Approved by the Board of Education: 4/19/05

Revision approved by the Board of Education: 9/15/05

Revision approved by the Board of Education for approval: 10/31/05

Attachment #1
PARENT AFFIDAVIT

STATE OF NEW YORK } ss:

COUNTY OF _____)

_____, being duly sworn, deposes and says:
(Name of Parent)

1. I am the _____ of _____.
(Relationship to Applicant) (Name of Applicant)
2. I reside at _____.
(Address of Parents)
3. Indicate reasons why the child is not living with the parent (s).
4. Give statement naming the individual who will have custody and control of the child.
5. Give statement setting forth the child's current address and living arrangement.
6. Explain the initial duration of the living arrangement, i.e., permanent, indefinite, to be terminated on a specific date, and/or upon a certain action/event, etc.
7. Describe any other location(s) where the child lives. Indicate the length of time the child is at the other address and provide an explanation. If the child does not live at any other address, so indicate.

8. Please provide any other relevant facts to assist the school district in making a determination in this matter.
9. As the parent, I relinquish custody and control of my child to the custodian, including the rights to make decisions pertaining to the health, welfare and education of my child.

(Signature of Parent)

Sworn to before me this _____
day of _____, 20____

(Notary Public)

***Note:** This is an affidavit which sets forth facts, the truth of which are sworn under oath. False swearing may constitute a crime punishable as provided in the Penal Law of the State of New York. The Brentwood School District may also take legal action to collect tuition charges in any case where a student is illegally registered.*

(FOR SCHOOL USE ONLY)

Reviewed by _____ Date _____

Principal

School: _____

Approved by: _____ Date _____

Coordinator of Attendance

**Attachment #2
CUSTODIAL AFFIDAVIT**

STATE OF NEW YORK } ss:

COUNTY OF _____)

_____, being duly sworn, deposes and says:
(Name of Custodian)

1. I reside at _____.
(Full Address of Custodian)
2. _____ is my _____.
(Full Name of Child) (Child's Relationship to Custodian)
and he/she has been living with me since _____.
(Date)
3. _____ intends to reside with me for _____.
(Child's Name) (Length of Time)
4. Give statement naming the individual who will have custody and control of the child.
5. Give the reasons the child is living with the person in custodial relationship.
6. Describe any other location (s) where the child lives. Indicate the length of time the child is at the other address and provide an explanation. If the child does not live at any other address, so indicate.
7. Please furnish a statement establishing who provides the child with food, clothing and all other necessities.

8. Please provide any other relevant facts to assist the school district in making a determination in this matter.
9. As the person in custodial relationship, I state that I will assume full responsibility for all matters to the child's education and medical care.

(Signature of Custodian)

Sworn to before me this _____
day of _____, 20_____

(Notary Public)

***Note:** This is an affidavit which sets forth facts, the truth of which are sworn under oath. False swearing may constitute a crime punishable as provided in the Penal Law of the State of New York. The Brentwood School District may also take legal action to collect tuition charges in any case where a student is illegally registered.*

FOR SCHOOL USE ONLY

Reviewed by: _____ Date _____
Principal

School: _____

Approved by: _____ Date _____
Coordinator of Attendance

Attachment #3

STUDENT AFFIDAVIT OF EMANCIPATION

STATE OF NEW YORK } ss:

COUNTY OF _____)

_____, being duly sworn, deposes and says:
(Name of Student)

1. I was born on _____ and I am over the age of sixteen.
(Date)
2. Give statement explaining the reasons you are not living with your parents.
3. I currently reside at _____

4. Explain your means of support, i.e., how do you provide for food, clothing and all other necessities.
5. Are you receiving any financial support from your parent (s)? If yes, please explain.
6. Give statement describing the current relationship you have with your parent (s), i.e., when last seen, contacted, knowledge of their whereabouts.

7. Please provide any other relevant facts to assist the school district in making a decision in this matter.

(Signature of Student)

Sworn to before me this _____
day of _____, 20_____

(Notary Public)

Note: *This is an affidavit which sets forth facts, the truth of which are sworn under oath. False swearing may constitute a crime punishable as provided in the Penal Law of the State of New York. The Brentwood School District may also take legal action to collect tuition charges in any case where a student is illegally registered.*

FOR SCHOOL USE ONLY

Reviewed by: _____ Date _____

School: _____

Approved by: _____ Date _____
Coordinator of Attendance

Attachment #4

PARENT AFFIDAVIT OF EMANCIPATION

STATE OF NEW YORK } ss:

COUNTY OF _____

_____, being duly sworn, deposes and says:
(Name of Parent)

1. I am _____ of _____
(Relationship to Applicant) (Name of Applicant)
2. I reside at _____
(Address of Parent)
3. Indicate reasons why the child is not living with the parent (s).
4. Are you providing any financial support to your son/daughter? If yes, please explain.
5. Give statement describing current relationship you have with your son/daughter, i.e., when last seen, contacted, knowledge of his/whereabouts.
6. Do you have any objections to the Brentwood School district admitting you son/daughter as an emancipated student? If yes, please explain.

7. Please provide any other relevant facts to assist the school district in making a decision in this matter.

(Signature of Parent)

Sworn to before me this _____
day of _____, 20_____

(Notary Public)

Note: This is an affidavit which sets forth facts, the truth of which are sworn under oath. False swearing may constitute a crime punishable as provided in the Penal Law of the State of New York. The Brentwood School District may also take legal action to collect tuition charges in any case where a student is illegally registered.

FOR SCHOOL USE ONLY

Reviewed by: _____ Date _____

Principal

School: _____

Approved by: _____ Date _____

Coordinator of Attendance

Attachment #5
AFFIDAVIT OF TENANT

STATE OF NEW YORK } ss:
COUNTY OF _____)

I hereby certify that I reside at _____
Which is within the boundaries of the Brentwood School District; that as legal guardian
or parent I am seeking to have the following student (s) registered in the Brentwood
School District:

Full Names (s)	Age
_____	_____
_____	_____
_____	_____

I hereby certify that this residence is the subject student's actual and only residence, and
that I have complete custody and control over such student (s). I recognize that the
Brentwood School District will rely upon this representation with respect to domicile and
I agree to bear legal responsibility for any inaccuracy of such representations.

Signature Date

Sworn to before me this _____ day of _____, 20____

Notary Public

*Note: This is an affidavit which sets forth facts, the truth of which are sworn under oath.
False swearing may constitute a crime punishable as provided in the Penal Law of the
State of New York. The Brentwood School District may also take legal action to collect
tuition charges in any case where a student is illegally registered*

FOR SCHOOL USE ONLY

Reviewed by: _____ Date _____
Principal School: _____

Approved by: _____ Date _____
Coordinator of Attendance

Attachment #6

AFFIDAVIT OF OWNER

STATE OF NEW YORK } ss:

COUNTY OF _____)

I hereby certify that I reside at _____
And I am either the record owner or one of the record owners of the foregoing residence
which is located within the territorial boundaries of the Brentwood School District or a
tenant at this property pursuant to a lease entered into on _____.

In addition to my family members, and also residing with me at this address, are the
following individuals:

I hereby state that all of the above-named members are permanent residents at this
address and reside here on a full-time basis. I recognize that the Brentwood School
District will rely upon this representation when considering the request to register and
admit the above-named individuals to school.

Signature Date

Sworn to before me this _____ day of _____, 20____

Notary Public

*Note: This is an affidavit which sets forth facts, the truth of which are sworn under oath.
False swearing may constitute a crime punishable as provided in the Penal Law of the
State of New York. The Brentwood School District may also take legal action to collect
tuition charges in any case where a student is illegally registered.*

FOR SCHOOL USE ONLY

Reviewed by: _____ Date _____
Principal School: _____

Approved by: _____ Date _____
Coordinator of Attendance