



HEMPFIELD AREA SCHOOL DISTRICT
4347 Route 136, Greensburg, PA 15601-9315
(724) 834-2590

Dr. Tammy S. Wolicki
Superintendent
Dr. Mark A. Gross
Assistant Superintendent
Secondary

Dr. Matthew R. Conner
Assistant Superintendent
Elementary
Mr. Wayne J. Wismar
Business Manager

Committed to Educational Excellence

APPLICATION FOR MULTIPLE OCCUPANCY REGISTRATION

Name(s) of the children:

I am the parent (or legal guardian) of the child or children named above. We reside in the Hempfield Area School District in a home or apartment that is owned or leased by _____, a resident of the Hempfield Area School District living at the same address.

The address is: _____

I assume responsibility for notifying the Hempfield Area School District, should my residence, name, or relationship to the owner/lessor change, within one month of the change. At that time, I will provide evidence of my new address, name or relationship to the owner/lessor, to my child/children's school office so that my residence and parent/guardianship remains updated.

I understand that if any information proves to be incorrect, now or in the future, the Hempfield Area School District has the right to reject the application and eject the student(s) from the school district classes being attended. I also understand that the School District has the right to collect tuition charges for each student enrolled.

_____ Check here if reason for moving to this address is due to loss of housing, economic hardship, fire, or domestic reasons.

If not, reason for occupancy:

_____ Check here if you want assistance from the district's home and school visitor.

_____ Anticipated length of stay with district residence.

Signature of Parent/Guardian

Sworn to and Subscribed before me,
Notary Public this ____ day of
_____, 20____

Notary Public

My Commission Expires:

7/2017