

## STUDENT REGISTRATION PACKET

<b>District Contact Information: 201-974-2000</b>			
<b>District Website: <a href="http://www.sboe.org">http://www.sboe.org</a></b>			
<i>Secaucus High School:</i>	201-974-2033 <a href="http://shs.sboe.org">http://shs.sboe.org</a>	<i>Clarendon Elementary:</i>	201-974-2010 <a href="http://clarendon.sboe.org">http://clarendon.sboe.org</a>
<i>Secaucus Middle School:</i>	201-974-2025 <a href="http://sms.sboe.org">http://sms.sboe.org</a>	<i>Huber St. Elementary:</i>	201-974-2053 <a href="http://huber.sboe.org">http://huber.sboe.org</a>

Reason	Suggested Documents
Verification of Child's Age	<ul style="list-style-type: none"> <li>Birth Certificate (original or certified copy)</li> <li>Passport</li> </ul>
Identification	<ul style="list-style-type: none"> <li>Personal identification of parent/guardian, bearing your name.</li> </ul>
Proof of Residency in the Town of Secaucus	<ul style="list-style-type: none"> <li>Purchase and Sales Agreement</li> <li>Mortgage Statement</li> <li>Deed</li> <li>Lease</li> <li>Section 8 Agreement</li> <li>Notarized Letter from Landlord <b>AND</b> <ul style="list-style-type: none"> <li><b>Residency Affidavit 1</b> (only where no written lease exists)</li> </ul> </li> <li><b>OR</b> <ul style="list-style-type: none"> <li><b>Residency Affidavit 3a AND 3b</b> (Family Temporarily Living with a District Resident)</li> </ul> </li> </ul>
Proof of Occupancy	<ul style="list-style-type: none"> <li>Utility bills, for example:                             <ul style="list-style-type: none"> <li>PSE&amp;G</li> <li>Water</li> <li>Cable</li> <li>Phone</li> </ul> </li> <li>Bank or Credit Card Statement</li> </ul>
Special Circumstances	<ul style="list-style-type: none"> <li>Non – Parent Registering Student – Consult School Personnel for additional forms</li> <li>Guardianship or Custody Papers <b>OR</b></li> <li>Verification of Division of Child Protection and Permanency (formerly DYFS) or State Agency placement <b>OR</b></li> <li>Verification of Hardship (medical reports, counselor or social worker assessments, employment documents, unemployment claims, benefit statements)</li> </ul> <p><b>AND</b></p> <ul style="list-style-type: none"> <li>Verification of Expenditure (receipts, bills, insurance claims, payments)</li> <li><b>Residency Affidavit 2a AND 2b</b></li> </ul>
Acknowledgement of Registration	See page 14.

## REGISTRATION INSTRUCTIONS

### **Read The Information Below Before Proceeding**

**All registrants should complete the Student and Contact Information Form, Request for Records, and Acknowledgement of Registration. If applicable, registrants should complete the Affidavit Section and Affidavits most appropriate to their situation.**

**The questions asked in the following pages will enable us to determine your student's eligibility to attend school in this district in accordance with New Jersey law.**

*Please be aware that N.J.S.A. 18A:38-1 and N.J.A.C. 6A:22 specify that a free public education will be provided to any student between the ages of 5 and 20, and to certain students under 5 and over 20 as specified in other applicable law, who are:*

- Domiciled in the district means that a student is living with a parent or guardian and is permanently residing within the district. A home is permanent when the parent or guardian intends to return to it when absent and has no present intent of moving from it, notwithstanding the existence of homes or residences elsewhere.
- Living with a person, other than the parent or guardian, who is domiciled in the district and is supporting the student without compensation, as if the student were his or her own child, because the parent cannot support the child due to family or economic hardship.
- Living with a parent or guardian who is temporarily residing in the district with another family.
- Living with a person domiciled in the district, other than the parent or guardian, where the parent/guardian is a member of the New Jersey National Guard or the reserve component of the U.S. armed forces and has been ordered into active military service in the U.S. armed forces in time of war or national emergency.
- The child of a parent or guardian who moves to another district as the result of being homeless.
- Placed in the home of a district resident by court order pursuant to N.J.S.A. 18A:38-2.

*Note that the following do not affect a student's eligibility to enroll in school:*

- Physical condition of housing or compliance with local housing ordinances or terms of lease.
- Immigration/visa status, except for students holding or seeking a visa (F-1) issued specifically for the purpose of limited study on a tuition basis in a United States public secondary school.
- Absence of a certified copy of birth certificate or other proof of a student's identity, although these should be provided within 30 days of initial enrollment, pursuant to N.J.S.A. 18A: 36-25.1.
- Absence of student medical information, although actual attendance at school may be deferred as necessary in compliance with rules regarding immunization of students, N.J.A.C. 8:57-4.1 et seq.
- Absence of a student's prior educational record, although the initial educational placement of the student may be subject to revision upon receipt of records or further assessment by the district.

**The following forms of documentation may demonstrate a student's eligibility for enrollment in the district. Particular documentation necessary to demonstrate eligibility under specific provisions in law will be indicated in the appropriate section of the registration form.**

- Property tax bills, deeds, contracts of sale, leases, mortgages, signed letters from landlords and other evidence of property ownership, tenancy or residency.
- Voter registrations, licenses, permits, financial account information, utility bills, delivery receipts, and other evidence of personal attachment to a particular location.

- Court orders, State agency agreements and other evidence of court or agency placements or directives.
- Receipts, bills, canceled checks and other evidence of expenditures demonstrating personal attachment to a particular location, or, where applicable, to support of the student.
- Medical reports, counselor or social worker assessments, employment documents, benefit statements, and other evidence of circumstances demonstrating, where applicable, family or economic hardship, or temporary residency.
- Affidavits, certifications and sworn attestations pertaining to statutory criteria for school attendance, from the parent, legal guardian, person keeping an “affidavit student,” adult student, person(s) with whom a family is living, or others, as appropriate.
- Documents pertaining to military status and assignment.
- Any business record or document issued by a governmental entity.
- Any other form of documentation relevant to demonstrating entitlement to attend school.

The totality of information and documentation you offer will be considered in evaluating an application, and, unless expressly required by law, the student will not be denied enrollment based on your inability to provide certain form(s) of documentation where other acceptable evidence is presented.

You will not be asked for any information or document protected from disclosure by law, or pertaining to criteria which are not legitimate bases for determining eligibility to attend school. You may voluntarily disclose any document or information you believe will help establish that the student meets the requirements of law for entitlement to attend school in the district, but we may not, directly or indirectly, require or request:

- Income tax returns;
- Documentation or information relating to citizenship or immigration/visa status, unless the student holds or is applying for an F-1 visa;
- Documentation or information relating to compliance with local housing ordinances or conditions of tenancy;
- Social security numbers.

**Please be aware that any determination of the student’s eligibility to attend school in this district is subject to more thorough review and subsequent re-evaluation, and that tuition may be assessed in the event that an initially admitted student is found ineligible. If your student is found ineligible, now or later, you will be provided the reasons for our decision and instructions on how to appeal.**

If you experience difficulties with the enrollment process, please contact:

Superintendent of Schools  
 Secaucus Board of Education  
 685 Fifth Street  
 Secaucus, NJ 07094

Or call: 201-974-2000

**STUDENT AND CONTACT INFORMATION FORM**

SECAUCUS HIGH SCHOOL     SECAUCUS MIDDLE SCHOOL     CLARENDON SCHOOL     HUBER ST. SCHOOL

Name of Person Enrolling Student: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

**STUDENT INFORMATION**

Last Name: \_\_\_\_\_ Generation: \_\_\_\_\_ (Jr. III, etc.)

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: \_\_\_ Male \_\_\_ Female      Nickname: \_\_\_\_\_

Grade your child should be considered for enrollment? Circle one: PreK K 1 2 3 4 5 6 7 8 9 10 11 12

*Note: Grade assignment is determined by age as of October 1<sup>st</sup> of year of entry:*

PreK, Four (4) years old; Kindergarten, Five (5) years old; First Grade, Six (6) years old. Students entering all other grades shall be placed in the proper grade based on prior school records.

**Ethnicity:**     Hispanic or Latino     Non Hispanic or Latino

**Race - Check that which applies:**

American Indian or Alaska Native     Asian     Black or African American     Spanish/Hispanic/Latino

Native Hawaiian or other Pacific Islander     White     Prefer not to answer

Home Language: \_\_\_\_\_ Native Language: \_\_\_\_\_

Birth City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Date first entered U.S. School System (if applicable): \_\_\_\_\_

**PARENT(S)/GUARDIAN(S) INFORMATION:**

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Secaucus, NJ 07094 \_\_\_\_\_

Mother's Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Mother's email \_\_\_\_\_

Primary Phone # \_\_\_\_\_ (This is the number you would like us to use first in an emergency)

If you are divorced, who has legal custody of the child? \_\_\_\_\_

Can you provide the supporting documents? Yes / No    Is there a court order pertaining to this child? Yes / No

**ADDITIONAL PARENT(S)/GUARDIAN(S) INFORMATION:**

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell # \_\_\_\_\_

Work # \_\_\_\_\_

Email \_\_\_\_\_

**CHECK BOX FOR "YES"**

Allowed to pick up student.

This is a medical contact.

Student lives here.

Mail is delivered here.

Father's Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Father's email \_\_\_\_\_

**CHECK BOX FOR "YES"**

Allowed to pick up student.

This is a medical contact.

Student lives here.

Mail is delivered here.

**EMERGENCY CONTACT (IF PARENT CAN'T BE REACHED):**

**CHECK BOX FOR "YES"**

Relationship: \_\_\_\_\_

Allowed to pick up student.

Name: \_\_\_\_\_

This is a medical contact.

Address: \_\_\_\_\_

Student lives here.

Cell # \_\_\_\_\_

Mail is delivered here.

Work # \_\_\_\_\_

Email \_\_\_\_\_

**SIBLINGS IN SECAUCUS SCHOOL DISTRICT (Provide the same contact information for siblings, even if they are not attending a Secaucus School.)**

Name	School Attending
_____	_____
_____	_____
_____	_____

**PRIOR SCHOOL INFORMATION AND RELEASE**

**Parent/Guardian Permission to Release and Exchange Confidential Information**

I hereby authorize an exchange of all school related information between the Secaucus Board of Education, Student Health Services, Administration and previous school district as needed.

Did student attend a 3 year old preschool? \_\_\_\_\_ Yes \_\_\_\_\_ No

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Previous School: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Did this student receive any of the following services in prior school? Check the box for "Yes".

Special Education:

English Language Learner (ELL):

Free/Reduced Meals:

***If you checked a box for any of the above items, additional documents are required. Please speak with your registrar.***

The Commissioner of Education has authorized school districts to request this information, which will be used in the generation of a State Identification Number (SID) to uniquely identify students enrolled in public schools. The SID is used to monitor student performance data so that higher quality research can be obtained for the purpose of determining improved policies and programs in New Jersey's public education system. Strict privacy and security policies are adhered to (punishable by law) once social security numbers are collected.

**For Official School Use Only**

EFFECTIVE ENTRANCE DATE \_\_\_\_\_ HOMEROOM: \_\_\_\_\_ COUNSELOR: \_\_\_\_\_ LOCKER # \_\_\_\_\_

DISTRICT ID: \_\_\_\_\_ NJ SMART SID: \_\_\_\_\_

**Required Affidavit(s) Provided and Returned:** Affidavit 1  Affidavit 2a  Affidavit 2b  Affidavit 3a  Affidavit 3b

**Acknowledgement of Registration Returned:** Yes  No

**If applicable cc:** CST  ELL  Test Coordinator  Free/Reduced Lunch Coordinator

ADMINISTRATOR'S APPROVAL: \_\_\_\_\_

REGISTRATION COMPLETED BY: \_\_\_\_\_

## REQUEST FOR RECORDS

Previous School Attended **(to be completed by parent/guardian)**

\_\_\_\_\_  
School Name School

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
School Address

\_\_\_\_\_  
School City, State, Zip

The following student registered in our school for the current year.

Name\_\_\_\_\_ Grade\_\_\_\_\_

Please forward the following information to us at the address below:

- \_\_\_ Official Transcript
- \_\_\_ Standardized Test Records
- \_\_\_ Health Records
- \_\_\_ Disciplinary Records
- \_\_\_ Child Study Team Records (If Applicable)
- \_\_\_ Free/Reduced Lunch Application

We appreciate your response as soon as possible so that we may properly complete our records.

**Clarendon School**  
685 Fifth Street  
Secaucus, NJ 07094  
(201) 974-2010  
(201) 974-0530 FAX

**Huber Street School**  
1520 Paterson Plank Rd  
Secaucus, NJ 07094  
(201) 974-2053  
(201) 815-2532 FAX

**Secaucus Middle School**  
11 Millridge Road  
Secaucus, NJ 07094  
(201) 974-2025  
(201) 974-0275 FAX

**Secaucus High School**  
11 Millridge Road  
Secaucus, NJ 07094  
(201) 974-2033  
(201) 974-1180 FAX

I hereby give my consent to the previous school indicated above to transfer copies of all mandated and permitted records of my son/daughter/ward to the Secaucus Public School District.

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**To Registrant:**

Please complete the appropriate section A, B, C or D below. If you are unsure, please consult your Registrar for assistance. If you require an Affidavit form, please ask your Registrar and the proper form will be provided to you.

Complete **SECTION A** (DOMICILE) if the student is living with you, the parent or guardian, whose permanent home is the address given on The Student and Contact Information Form and is located in the district. The parent/guardian should complete the ***Acknowledgement of Registration*** Form.

OR

Complete **SECTION B** ("AFFIDAVIT" STUDENT) if the student is living with a person domiciled in the district, other than the parent or guardian. The parent/guardian as well as the person domiciled in the district with which the child is living should complete the ***Acknowledgement of Registration*** Form and ***Residency Affidavits 2a*** and ***2b*** in addition to this form.

OR

Complete **SECTION C** (TEMPORARY RESIDENT) if the student is living with a parent or guardian temporarily residing within the district. You and the family domiciled in the district with whom you are residing should complete the ***Acknowledgement of Registration*** Form and ***Residency Affidavits 3a*** and ***3b*** in addition to this form.

OR

Complete **SECTION D** (SPECIAL CIRCUMSTANCES) if the student's situation is not addressed by Section A, B or C or if any of the circumstances in Section D apply. The parent/guardian as well as the person domiciled in the district with which the child is living should complete the ***Acknowledgement of Registration*** Form and ***Residency Affidavits 2a*** and ***2b*** in addition to this form.

***Residency Affidavit (Landlord Affidavit)*** is to be used in all instances where a written lease does not exist.

## RESIDENCY AFFIDAVIT INSTRUCTIONS

**To: Registrant**

If necessary, please complete the appropriate Residency Affidavit as outlined below

<i><b>If...,</b></i>	<i><b>Then...</b></i>
...no written lease exists...,	...your landlord should complete <b><i>Residency Affidavit 1.</i></b>
...the student is living with a person who is domiciled in the Secaucus district other than the parent or legal guardian...,	...the parents or legal guardian should complete <b><i>Residency Affidavit 2a.</i></b>  <b>and</b> the non-parent resident should complete <b><i>Residency Affidavit 2b.</i></b>
...the student and parent or legal guardian are together and temporarily living with a Secaucus district resident...,	...the parent or legal guardian should complete <b><i>Residency Affidavit 3a.</i></b>
...you are a Secaucus district resident and providing housing for another family...,	...the Secaucus district resident should complete <b><i>Residency Affidavit 3b.</i></b>

***Only complete the section that applies to your student. Please speak with your Registrar if you are unsure.***



**SECTION A (DOMICILE):** Complete this section if the student is living with a parent/guardian whose permanent home is located in the Secaucus School District. If you are the student's guardian, or will be the guardian of a student from out of state following expiration of the required 6-month waiting period, you will be asked to provide official papers proving guardianship.

1. How long have you lived in this home?

\_\_\_\_\_

2. If you have lived in this home less than five years, please provide previous addresses:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Do you plan to move from this home? If so, when and to where?

\_\_\_\_\_

4. Do you have residences elsewhere? If so, where and do you currently live there?

\_\_\_\_\_

Attach an original or certified copy of a deed, contract of sale or lease agreement, as well as **four** (4) additional forms of proof (see list in the Preliminary Information section). If you do not have a written lease, attach a copy of **Residency Affidavit 1** signed by your landlord as well as **four** (4) additional forms of proof.

*Additional Forms of Proof:*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

*If the student's parents are domiciled in different districts, regardless of which parent has legal custody, please answer the following questions:*

1. Is there is a court order or written agreement between the parents designating the district for school attendance? \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

2. If YES, where does it require the student to attend school? (A copy of this document is required)

\_\_\_\_\_

*Continued on next page*

3. Does the student reside with one parent for the entire year? If so, provide name and address of parent:

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4. If not, for what portion of time does the student reside with each parent and at what addresses:

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5. If the student lives with both parents on an equal-time, alternating week/month or other similar schedule, with which parent did the student reside on the last school day prior to October 16 before the date of this application?

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*Note: No district is required, as a result of being the district of domicile for school attendance purpose where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent domiciled within the district to the extent required by law.*

1. If you are claiming to be an emancipated student, are you living independently in your own permanent home in the district? If yes, please describe the proofs you will provide to prove that you are not in the care and custody of a parent or legal guardian:

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*Note: Under New Jersey Law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location with a municipality, the district of domicile for school attendance purpose is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.*

**END OF SECTION A**

**SECTION B (“AFFIDAVIT” STUDENT):** Complete this section *if the student is living with a person domiciled in the district, other than the parent or guardian.* You should also provide the required sworn statements as detailed below.

Is the person domiciled in the district, supporting the student without payment as if the student were his or her own child, keeping the student for a longer time than the school term and assuming all personal obligations for the student relative to school requirements? Please explain.

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Students are not eligible to attend school as “affidavit” students unless the student’s parent or guardian is not capable of supporting or providing care for the student due to family or economic hardship, and unless it is clear that the student is not living in the district solely for purposes of receiving a public education there. Please explain the circumstances applicable in this case, with special attention to the parent/guardian’s family and/or economic hardship. (Both the parent / guardian and the Secaucus resident will be required to file sworn statements with documentation to support the claims made.)

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You will be asked to file a sworn statement (**Residency Affidavit 2a**) regarding your non-support of your child, along with an original or certified copy of the Secaucus Resident’s deed or contract of sale (if a homeowner), lease (if a tenant), or **Residency Affidavit 1** (if a tenant without written lease). In addition, you will be asked to have the Secaucus Resident complete and file a sworn statement (**Residency Affidavit 2b**). Please see your Registrar for the proper forms.

*Please note: A student will not be considered ineligible because required sworn statements(s) cannot be obtained, so long as evidence is presented that the underlying requirements of the law are being met. A student will not be considered ineligible when evidence is presented that the student has no home or possibility of school attendance other than with a non-parent district resident who is acting as the sole caretaker and supporter of the student.*

**END OF SECTION B**

**SECTION C (TEMPORARY RESIDENT):** Complete this section if the student **is living with parent or guardian temporarily residing within the district**, even if the parent has a domicile elsewhere. You should provide a sworn statement (**Residency Affidavit 3a**) signed by the individual(s) with whom you are currently residing. Those individual(s) should provide proof of residency and a sworn statement (**Residency Affidavit 3b**) demonstrating proof of temporary residence.

How long have you lived in this residence? \_\_\_\_\_

Do you have a domicile or residences(s) elsewhere?     \_\_\_ YES \_\_\_ NO  
If **YES**, where are they and when do you live there?

\_\_\_\_\_

Please list **four** (4) forms of proof (See Registration Instructions) you will provide to demonstrate that you are residing at the address given on this application, and that such residence is not solely for the purpose of the student attending school in the district.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

*Under New Jersey law, where a dwelling is located within two or more local school districts, or bears a mailing address that does not reflect the dwelling's physical location within a municipality, the district of domicile for school attendance purposes is that of the municipality to which the resident pays the majority of his or her property tax, or to which the majority of property tax for the dwelling in question is paid by the owner of a multi-unit dwelling.*

If the student's parents are domiciled in different districts, regardless of which parent has legal custody, please answer the following questions:

- 1. Is there a court order or written agreement between the parents designating the district for school attendance, and if so, where does it require the student to attend school? (You will be asked to provide a copy of this document.)  
\_\_\_\_\_
- 2. Does the student reside with one parent for the entire year? If so, with which parent and at what address?  
\_\_\_\_\_
- 3. If not, for what portion of time does the student reside with each parent and at what addresses?  
\_\_\_\_\_
- 4. If the student lives with both parents on an equal-time, alternating week/month or other similar basis, with which parent did the student reside on the last school day prior to October 16 preceding the date of this application?  
\_\_\_\_\_

*Please note: No district is required, as a result of being the district of temporary residence for school attendance purposes where a student lives with more than one parent, to provide transportation for a student residing outside the district for part of the school year, other than transportation based upon the home of the parent residing within the district to the extent required by law.*

**END OF SECTION C**

**SECTION D (SPECIAL CIRCUMSTANCES):** Please indicate **if any of the following apply.**

- **Residency Affidavit 2a** should be completed by the Parent/Guardian.
- **Residency Affidavit 2b** should be completed by the district resident with whom the child is living.

- The student is the child of a parent or guardian who has moved to another district as the result of being homeless.
- The student has been placed in the home of a district resident other than the parent or guardian by court order. (You will be required to provide a copy of the order).
- The student has been placed in the district by the Division of Child Protection and Permanency (formerly DYFS) acting as the student's legal guardian.
- The student is a child of a parent or guardian who previously resided in the district and is a member of the New Jersey National Guard or the United States reserves ordered to active service in time of war or national emergency.
- The student is kept in the home of a person domiciled in the district, other than the parent or legal guardian, and the parent/guardian a member of the New Jersey National Guard or the reserve component of the United States armed forces and has been ordered into active military service in the United States armed forces in time of war or national emergency. If this applies, when is the parent or guardian expected to return from active military duty?
- The student resides on federal property located at: \_\_\_\_\_
- The student's circumstances do not appear to be addressed anywhere in this application. I understand that I will be contacted by the Superintendent of Schools, or designee, for further information.

**END OF SECTION D**

If you experience difficulties with the registration process, please contact:

Superintendent of Schools,  
Secaucus Board of Education  
685 Fifth Street  
Secaucus, NJ 07094

Or call: 201-974-2000

**ACKNOWLEDGEMENT OF REGISTRATION**  
**(Required for all registrations)**

This Registration Form is submitted for the purpose of inducing the Secaucus Board of Education to accept my/our child/children as a student in the Secaucus Public Schools on a tuition-free basis.

I/We state that the information contained in this Form is true and accurate and acknowledge the Secaucus Board of Education's reliance upon the truthfulness and accuracy of this information.

I/We understand that residency checks are regularly completed and may be conducted as early as 6 a.m. The Secaucus Residency Officer will identify himself or herself and carry photo ID.

If any of the statements contained in this Registration Form are willfully false, I/we are aware that I/we are subject to the criminal penalties provided by law for perjury and/or false swearing, and I/we will be personally liable for the payment of tuition for the child retroactive for the period of ineligible attendance of said child/children in the Secaucus Public Schools as well as any related costs and/or fees, including attorney fees, incurred as a result of such ineligible attendance.

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

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

Printed Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

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