

HEATH CITY SCHOOL DISTRICT CUSTODY/GUARDIANSHIP AFFIDAVIT

I, _____, first being duly sworn, state that I reside in the Heath City School District and that I have initiated proceedings to obtain legal custody/guardianship of _____, who was born on _____.

ORC 23.9 requires that legal custody provided by the court must be obtained within 60 days.

● **PERSON SEEKING LEGAL CUSTODY:**

Name _____ Relationship to Child _____

Address _____ City _____ State _____ Zip _____

Phone _____ Resides in _____ County, within the _____ School District

● **PERSON WHO CURRENTLY HAS LEGAL CUSTODY:**

Name _____ Relationship to Child _____

Address _____ City _____ State _____ Zip _____

Phone _____ Resides in _____ County, within the _____ School District

The student's prior school of attendance was _____ School District located in City _____ State _____.

I hereby authorize the principal or his/her designee to contact my attorney regarding the proceeding.

Attorney's Name _____ Phone _____

Address _____

I understand that, if custody/guardianship cannot be proven by a certified court order prior to the end of the sixty (60) day period, the above-named student will be excluded, unless admission on a tuition basis is approved. For the student to remain enrolled under this provision, a tuition application must be completed, submitted to the Superintendent, and the parent(s) must sign an agreement to prepay tuition on a monthly basis.

(Please sign in the presence of a Notary Public)

I swear that the above information is correct to the best of my knowledge.

Signature of Applicant

Sworn to and subscribed in my presence this _____ day of _____, 20 _____

Signature of Notary Public

Based on the information provided, the request for approval to enroll the above-named student under Section 3313.64(E) ORC is:

() APPROVED () DENIED

School
Custodial Parent
Attorney

Principal/Principal Designee