



CROTON-HARMON SCHOOL DISTRICT

DISTRICT OFFICE
10 GERSTEIN STREET
CROTON-ON-HUDSON, NEW YORK 10520
TEL: (914) 271-4793 FAX: (914) 271-8685

Stephen Walker
Superintendent of Schools

Living Arrangement Affidavit

I, _____, hereby attest that the following people will be residing with me at my residence at:

within the Croton-Harmon School District:

These people intend to live with me

beginning (date) _____ to _____

I attest that the information provided above is accurate.

Signature

Print

Notary Public

Date

By signing this affidavit, you attest that the information you are providing is accurate. If it is determined that the information contained in your sworn affidavit is false, the Croton-Harmon School District may seek legal recourse, including but not limited to, filing a criminal complaint with the Croton-on-Hudson Police Department for filing a false document with a public entity.