

Required

Local

Notice

**SCHOOL ADMISSIONS**

The district shall provide a public education to all persons residing in the district between the ages of five and twenty-one who have not received a high school diploma. *Residence of homeless children to attend district schools*

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income tax form, telephone or utility bills or other bills, membership documents based upon residency, official driver's license, learner's permit, or non-driver identification, rent payment receipts, a copy of a money order for payment of rent, a letter from a parent's employer that is written on company letterhead, voter registration document, or a state- or ~~other government-issued ID documents issued by federal, state, or local~~

agencies, or judicial custody orders or guardianship papers showing residency. The district may require multiple forms of residency

www.bayshoreunionschools.org/parents/parent-education-services/parent-education-services-08261

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Parental Services for Deaf and Hearing Impaired Children New

**SCHOOL ADMISSIONS EXHIBIT**

BAY SHORE UNION FREE SCHOOL DISTRICT  
75 West Perkal Street  
Bay Shore, New York 11706

**CUSTODIAL AFFIDAVIT**

STATE OF NEW YORK )  
                                  )ss:

\_\_\_\_\_, being duly sworn, disposes and says:  
(Name of Custodian)

1. I live at (Full address of Custodian):  
\_\_\_\_\_  
\_\_\_\_\_

2. (Full Name of Child) is my (Child's relationship to Custodian):  
\_\_\_\_\_  
\_\_\_\_\_

3. (Child's Name) intends to reside with me for (Length of Time):  
\_\_\_\_\_  
\_\_\_\_\_

8. Custodial statement assuming full responsibility for all matters relating to the child's education and medical care.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Statement of any other relevant facts

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Custodian

Sworn to before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public