

**CONSENT OF PARENT FOR CHILD TO RESIDE WITH SCHOOL DISTRICT  
RESIDENT AND DELEGATION OF EDUCATIONAL AUTHORITY**

COMMONWEALTH OF PENNSYLVANIA	)	CARLISLE AREA SCHOOL DISTRICT
	:ss.	623 WEST PENN STREET
COUNTY OF CUMBERLAND	)	CARLISLE, PA 17013

I/We, \_\_\_\_\_ and \_\_\_\_\_ being duly sworn according by law depose and say:

that I/we \_\_\_\_\_  
parents/legal guardian of, \_\_\_\_\_ date of birth \_\_\_\_\_,  
grade \_\_\_\_\_, state that \_\_\_\_\_ will be residing in the  
home of \_\_\_\_\_  
at \_\_\_\_\_.

I/We delegate to \_\_\_\_\_, our authority to make all day-to-day educational decisions for my/our child, acting on my/our behalf, including decisions relating to special education, student discipline, sports participation, choice of educational curriculum and classes and extra-curricular activities in general, to the full extent that I/we would have the authority to make such decisions for my/our child.

My/Our son/daughter will be attending school in the Carlisle Area School District\* for the \_\_\_\_\_ school year.

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

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

\_\_\_\_\_  
Signature of Notary Public  
My commission expires: \_\_\_\_\_.

\*The District reserves the right to share the above information with governmental agencies, i.e., Internal Revenue Service, particularly when questions of legal guardianship occur.

## AFFIDAVIT RE PUPIL STATUS (NON-PARENT RESIDENT)

COMMONWEALTH OF PENNSYLVANIA	)	CARLISLE AREA SCHOOL DISTRICT
	:ss.	623 WEST PENN STREET
COUNTY OF CUMBERLAND	)	CARLISLE, PA 17013

I/We, \_\_\_\_\_ and \_\_\_\_\_ being duly sworn according to law depose and say:

- 1: that I/we reside in the Carlisle Area School District at \_\_\_\_\_  
\_\_\_\_\_ in the  
(post office address/street address)  
township \_\_\_\_\_.
- 2: that \_\_\_\_\_ who was born on  
(first, middle, and last name of pupil)  
\_\_\_\_\_, 20\_\_\_\_, resides with me/us at the above address, which named child is  
not my/our own child.
- 3: that I/we am/are supporting the above named child gratis as if said child were my/our own child.
- 4: that I/we will assume all personal obligations for the above named child relative to the school requirements of the Carlisle Area School District.
- 5: that I/we intend to so keep and support the above named child continuously and not merely through the school term.
- 6: that this affidavit is made in compliance with Section 1302 of the Public School Code of 1949, as amended, and as an inducement to the Carlisle Area School District to accept the above named child as a pupil in said school district.\*

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

\_\_\_\_\_  
Signature of Notary Public  
My commission expires: \_\_\_\_\_.

\*The District reserves the right to share the above information with governmental agencies, i.e., Internal Revenue Service, particularly when questions of legal guardianship occur.