

# NORDONIA HILLS CITY SCHOOLS

## RESIDENCY DECLARATION

(TO BE COMPLETED BY PROPERTY OWNER)

I, \_\_\_\_\_, certify that I am the owner of the residence/apartment located at \_\_\_\_\_.

I further certify that \_\_\_\_\_ has established permanent residence in the aforementioned residence/apartment and, to the best of my knowledge, is not maintaining a separate residence elsewhere. I have attached my \_\_\_\_\_ purchase agreement/deed or \_\_\_\_\_ lease agreement. (check one)

_____	_____
_____	_____
_____	_____
_____	_____

All Adult(s) in Residence

\_\_\_\_\_ All Child(ren) in Residence

I realize that should any of the above statements be false, ***I hereby agree to assume tuition costs for the student(s) listed above for the period of time s/he has been attending the Nordonia Hills City Schools and am liable for any penalties which the law provides under the criminal code.***

Current tuition costs\* are gr. K-12 \$7,289.71 per child, annually, or for any portion thereof.

(\*Subject to change for the 11-12 SY)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

State of Ohio

County of \_\_\_\_\_

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

(SEAL)

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

My Commission Expires \_\_\_\_\_

# NORDONIA HILLS CITY SCHOOLS

## RESIDENCY VERIFICATION

**(TO BE COMPLETED BY PARENT)**

I, \_\_\_\_\_, certify that I am the custodial parent/legal guardian  
of \_\_\_\_\_  
and that I have established permanent residency at \_\_\_\_\_  
\_\_\_\_\_.

I attest that the information I have provided in this declaration is accurate. Should any of this information be incorrect, ***I hereby agree to assume tuition costs for the student(s) listed above for the period of time s/he has been attending the Nordonia Hills City Schools.*** Current tuition costs\* are gr. K-12 \$7,289.71 per child, annually, or for any portion thereof. (\*Subject to change for the 11-12 SY)

I agree to and stipulate that the Nordonia Hills City School District may utilize whatever means it has at its disposal to verify my residency.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

State of Ohio  
County of \_\_\_\_\_

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

(SEAL)

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_