

## TO BE COMPLETED BY THE "HOST" FAMILY

THIS FORM IS TO BE COMPLETED AND SWORN TO BEFORE A NOTARY PUBLIC IN CASES WHERE ENROLLMENT OF A STUDENT IS REQUESTED ON THE BASIS THAT THE STUDENT AND HIS/HER PARENT(S) OR GUARDIAN(S) HAVE ESTABLISHED RESIDENCE WITH A "HOST FAMILY" IN THE CITY OF NEW ROCHELLE. THE SCHOOL DISTRICT RESERVES THE RIGHT TO REQUIRE PERIODIC RE-CONFIRMATION OF THE INFORMATION PROVIDED.

**SPECIAL NOTE FOR HOMELESS STUDENTS:** Students who are homeless may, but ARE NOT REQUIRED to complete this form as a condition to initial enrollment. These students are protected under the McKinney-Vento Act and are eligible for immediate or continued enrollment. If you think that you are homeless, or are living doubled-up, please call the District's LEA liaison, Dr. Rhonda G. Jones, as soon as possible at (914) 576-4274.

CITY SCHOOL DISTRICT OF NEW ROCHELLE  
515 NORTH AVENUE  
NEW ROCHELLE, NEW YORK, 10801

### STATEMENT OF HOST TO ESTABLISH RESIDENCE OF STUDENTS

*(All sections must be completed in full)*

*The School District will enroll students whose families have legitimately established residence in New Rochelle by residing with a "host family." "Legitimate" means that the host family must be bona fide New Rochelle residents, and that the family being hosted (both parents and children) legitimately live with the host family as their sole and only place of residence. \* If it is determined that a fraudulent "host family" situation has been created in order to permit a non-resident child to attend the New Rochelle public schools, civil action may be taken against persons participating in the fraud, and criminal referrals may be made.*

**PLEASE DO NOT SIGN THIS FORM WITHOUT READING THE PROVISIONS OF THE NEW YORK STATE  
PENAL LAW WHICH APPEAR ON PAGE 4 OF THIS FORM.  
FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY LAW.**

### STATEMENT OF HOST FAMILY

STATE OF NEW YORK }  
COUNTY OF WESTCHESTER } SS.:

being duly sworn, deposes and states:

\_\_\_\_\_  
*Print Host Family head of household name*

\* In cases where a child is living in New Rochelle but his/her parent(s) does (do) not live in New Rochelle, enrollment will be permitted only if there has been a legitimate transfer of care, custody and control of the child to a New Rochelle resident. In such cases, either a Court order granting custody must be presented, or the natural parent(s) and the guardian(s) must complete satisfactory affidavits of custody. This Host Family form should not be used for custody situations.

1. I reside at \_\_\_\_\_  
*Print street address and apartment number if applicable.*

In the City of New Rochelle. My ZIP code is \_\_\_\_\_, my home phone number is \_\_\_\_\_  
my cell phone is \_\_\_\_\_, my email is: \_\_\_\_\_

2. On about \_\_\_\_\_ the following persons ("the Visiting Family") moved into my home on a  
*date*  
permanent basis:

Name	Relationship	Date of birth	Gender ("M" o "F") / Age
Name	Relationship	Date of birth	Gender ("M" o "F") / Age
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Name	Relationship	Date of birth	Gender ("M" o "F") / Age
Name	Relationship	Date of birth	Gender ("M" o "F") / Age
Name	Relationship	Date of birth	Gender ("M" o "F") / Age
Name	Relationship	Date of birth	Gender ("M" o "F") / Age

3. In addition to the Visiting Family, an additional \_\_\_\_\_ adults and \_\_\_\_\_ children live in my home. My home  
*Number* *Number*  
consists of a total of \_\_\_\_\_ rooms, of which \_\_\_\_\_ are bedrooms.  
*Number* *Number*

4. The relationship between me and the visiting Family is as follows: \_\_\_\_\_  
*Explain here how you are related*

\_\_\_\_\_ to the visiting Family. (Examples: a member of the Visiting Family is a brother, sister-in-law or friend).

Use another sheet of paper if necessary.

5. I have the following arrangements with the Visiting Family for rent and expenses:

\_\_\_\_\_ Explain here what arrangements you have made for the payment of rent or other expenses by the Visiting Family. If none, write "None".

Use another sheet of paper if necessary. **ATTACH COPIES OF ANY AGREEMENTS OR PAYMENT RECORDS.**

6. Before the Visiting Family moved into my home, the Visiting Family lived at:

\_\_\_\_\_ State the address at which the Visiting Family lived before coming to your home. If different members of the Visiting Family lived at

different addresses, please explain who lived where. Use another sheet of paper if necessary.



7. The Visiting family is living with me because:

\_\_\_\_\_  
Explain why the Visiting Family is living in your home

\_\_\_\_\_  
instead of in their own home. Use another sheet of paper if necessary

8. I expect the Visiting Family to be living in my home until:

\_\_\_\_\_  
Date. If you do not know. Write "Indefinitely"

9. Check either Box A or Box B. If you check Box B, explain the living arrangements of the member(s) of the Visiting Family who do not live with you full-time.

A. ☐ All members of the Visiting Family live with me seven days per week.

B. ☐ The following members of the Visiting Family live with me fewer than seven days per week:

\_\_\_\_\_  
As to each person, state which days he/she lives with you and where he/she lives on other days.

\_\_\_\_\_  
Use another sheet of paper if necessary.

10. I understand that, in reliance on the truthfulness of my statements as made in this Affidavit, the School District will, if it determines based upon my statements that a school-age child in the Visiting Family is a resident of the School District, provide a free education to such child at substantial public expense. ***I understand that if it is determined, whether because of untruthful statements on my part or because of a change in living arrangements, that the child is not a resident of the School District, then I may be liable for tuition at the rate permitted by law for the child's attendance during any period(s) of non-residency.***

11. I have read the provisions of the New York State Penal Law, which appear on the next page.

\_\_\_\_\_  
Signature of Head of Host Family.

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State and Country

Subscribed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_ 201 \_\_\_\_\_

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

**PLEASE READ THE IMPORTANT INFORMATION BELOW**

**New York Penal Law § 175.30. Offering a false instrument for filing in the second degree.**

A person is guilty of offering a false instrument for filing in the second degree when, knowing that a written instrument contains a false statement or false information, he offers or presents it to a public office or public servant with the knowledge or belief that it will be filed with, registered or recorded in or otherwise become a part of the records of such public office or public servant.

**Offering a false instrument for filing in the second degree is a class A misdemeanor.**

**New York Penal Law § 175.35. Offering a false instrument for filing in the first degree.**

A person is guilty of offering a false instrument for filing in the first degree when, knowing that a written instrument contains a false statement or false information, and with intent to defraud the state or any political subdivision, public authority or public benefit corporation of the state, he offers or presents it to a public office, public servant, public authority or public benefit corporation with the knowledge or belief that it will be filed with, registered or recorded in or otherwise become a part of the records of such public office, public servant, public authority or public benefit corporation.

**Offering a false instrument for filing in the first degree is a class E felony.**

**New York Penal Law § 210.45. Making a punishable false written statement.**

A person is guilty of making a punishable false written statement when he knowingly makes a false statement, which he does not believe to be true, in a written instrument bearing a legally authorized form notice to the effect that false statements made therein are punishable.

**Making a punishable false written statement is a class A misdemeanor.**

**DEPARTMENT OF PUPIL SERVICES USE ONLY**

Reviewed on \_\_\_\_\_ By: \_\_\_\_\_  
Date Name of the person reviewing form

Name of Attendance teacher \_\_\_\_\_ Date: \_\_\_\_\_  
Time: \_\_\_\_\_

New Resident of New Rochelle	
Change of address within New Rochelle	
Change of School within New Rochelle	
Other:	

School Name: \_\_\_\_\_  
\_\_\_\_\_

Verified ☐ Not verified ☐

Name of Attendance Teacher \_\_\_\_\_ Date \_\_\_\_\_

Student(s) name(s): \_\_\_\_\_

School of Attendance: \_\_\_\_\_

c.c.: School of Attendance