## State College Area School District Statement of District Residency

The State College Area School District is proud to offer a high quality public education to our residents. The District also has a very active residency verification program to protect our community resources and abide by state auditing procedures. This program can include, but is not limited to, complete documentation verification, investigation by District personnel, independent investigation by law enforcement officials and surveillance.

It is the intent of the District to prosecute to the fullest extent of the law, any individual furnishing false information for the purpose of enrolling non-resident students. In accordance with Public School Code Section 1302, *penalties* for providing false information are as follows:

- Immediate removal from school after notice and an opportunity to appeal
- A criminal penalty of a fine of up to \$300 and/or up to 240 hour of community service
- Any individuals involved in filing the false statement will be liable for tuition during the period of enrollment

I certify that I have read and understand the above notice. Additionally, I agree to pay the District its full tuition cost as well as any other applicable costs, penalty, or amounts if the student enrolled is found to be a non-resident.

ADDRESS:	-			
This ac	ddress reflects	the following	guardians and studen	ts:
1	Mother	Father	Other Guardian	
Student Name	Student N	umber	Current School	New School
		<del></del>	1	
 Guardian Signature			Date	

This completed form along with proof of residency should be turned into the Registration Office