



Change of Address Information

If you move and change your address, you will need to provide proper documents before the students' records or transportation can be changed. Please use the information below to gather the appropriate documentation. Call the school office to make an appointment to bring in your documents.

☐ **PARENT/GUARDIAN IDENTIFICATION** – Please provide one of the following:

- ☐ Ohio Valid Driver's License or State ID with Current Address ☐ Social Worker ID

Parents and/or legal guardians must reside within the Twinsburg City School District for their children to attend Twinsburg Schools. The school attendance laws of the State of Ohio are strictly enforced. Please call the Business Manager, at the Board of Education Office (330.486.2003) if you are unsure whether your child is eligible to register in the Twinsburg City School District.

☐ **PROOF OF RESIDENCY** – MUST provide ALL of the following. **FORMS LISTED ARE THE ONLY FORMS THAT WILL BE ACCEPTED (NO EXCEPTIONS WILL BE MADE):**

- ☐ **Residency and Custody Affidavit (Form R2)** – can be notarized at registration appointment
- ☐ **Proof of Ownership:**
- For current Home Owners: Please provide the **Property Deed**
 - For a Pending Home Purchase/New Home Construction: Please provide a signed **Purchase Agreement** and the **New Home Construction/Pending Purchase (Form R9)** – must be signed and notarized
 - For Renters: must provide a **current signed rental or lease agreement** where the Parent(s)/Guardian(s) and student(s) are named as occupants AND the **Renter Authorization for Release of Information (Form R4)**
- ☐ **TWO (2)** of the following documents – must be dated within the current month and in the name of the Parent(s)/Guardian(s):
- Utility Bill, Home/Apartment Insurance Declaration, Municipal Income Tax Bill, Section 8 Documentation, or Driver's License/State I.D. with current address (License/I.D. cannot be expired)

**➔ BANK STATEMENTS, CREDIT CARD STATEMENTS OR ANY BILL OTHER THAN A UTILITY BILL ⬅
WILL NOT BE ACCEPTED (NO EXCEPTION WILL BE MADE)**

IF FAMILY IS RESIDING WITH ANOTHER TWINSBURG RESIDENT, THE FOLLOWING MUST BE PROVIDED IN ADDITION TO THE ABOVE:

- **Owner Affidavit of Residency (Form R3)** must be completed by the Property Owner and Notarized. The Twinsburg resident must also provide a property deed, along with two residency proofs (as listed above) and their current Ohio Driver's License.

Attachments:

Residency & Custody Affidavit (all)

Renter's Authorization for Release of Information (for renters only)

Owners Affidavit of Residency (if living with another Twinsburg family)

Transportation Change Form (if moving within Twinsburg during the school year)

**RESIDENCY AND CUSTODY AFFIDAVIT**

For the purpose of establishing school residence and custody – to be completed by parent or legal guardian
SIGN ONLY AFTER CAREFULLY READING AND SIGNING IN THE PRESENCE OF A NOTARY

THE UNDERSIGNED, FIRST BEING DULY SWORN ACCORDING TO LAW, STATE THAT:

I, _____, certify that I am the custodial parent/legal guardian of _____
 (Parent or Legal Guardian) (Student's Name)

and that I have established residency at _____
 (Street Number, Name, Apt #) City State Zip Code

For renters: Date of Occupancy: _____ Lease End Date (if applicable): _____

I, _____, certify that I am a resident of the above residence located within the Twinsburg City School District. The registrar has explained to me that legal residency is determined by certain conditions, among them are that mail delivery, voting residence, and payroll city tax deductions are based on the family's **Twinsburg City School District** address and also, that the residence where meals are taken, and where the resident parent sleeps must be the **Twinsburg City School District** residence. (Photo identification, such as an Ohio Driver's License with your most recent address, is required for identification.)

List the names of **ALL** people, both adults and children, who reside at the above address. Also, please indicate their school (if applicable) or "status" (i.e., homeowner, lessee, renter, parent, guardian, student, preschooler, grandparent, etc.) Attach a separate piece of paper, if needed.

Last Name	First Name	School/Status	Last Name	First Name	School/Status

Please read each statement and then place your initials to the left of the statement.

- _____ I/we certify that the information provided in this document and registration packet is true and no information has been withheld, concealed, or misrepresented for the purpose of circumventing the school attendance laws of the State of Ohio in order to register named students in the Twinsburg City School District.
- _____ I/we understand that I/we are responsible for informing school officials of any change(s) in the residence of any parent, legal guardian, or other responsible adult. If I change my present address to another address that is within the Twinsburg City School District, I will immediately file another residency and custody affidavit with the Board of Education of the **Twinsburg City School District**. I further understand that if the above noted address ceases to be my legal residence and my new residence is outside the boundaries of the **Twinsburg City School District**, I will withdraw my child(ren) from the district and will register my child(ren) in the new district of residence.
- _____ I/we acknowledge the student who is being registered has not been expelled or excluded from any other school pursuant to O.R.C. Sections 3301.121 and 3313.662.
- _____ I/we understand that if the student attends school while not being eligible to do so tuition free, the student and all responsible parties will be liable for tuition at a rate set by the Ohio Department of Education according to the Ohio Revised Code 3317.08, plus administrative costs, court costs, and any attorney fees incurred in the collection of those sums and the student will immediately be withdrawn from the Twinsburg City School District. Tuition will be charged per the current rate published by the Ohio Department of Education. Tuition for the 2023-24 school year is \$11,516.68.
- _____ I/we understand that the Twinsburg City School District may use whatever legal means it has at its disposal to verify my residency. I/we hereby waive my rights to confidentiality of information relative to my/our residence and give permission to the Twinsburg City School District, the City Tax Administrator, to release selected information such as name, social security number, and current and former addresses to confirm or deny my residency for the current or prior years.
- _____ I/we understand that a complete, certified time-stamped court document designating custody/guardianship of the above named child must be presented at the time of registration or within sixty (60) days of registration or this child will be removed from the Twinsburg City School District to be registered in the school district of his/her legal guardian.

NOTE: Be sure you have read this statement carefully before you sign. **Giving false information under oath is punishable as a criminal offense** under the Ohio Revised Code 2921.13 and 2921.21, a misdemeanor of the first degree with a maximum fine of \$1,000 and/or a jail term of six months. In cooperation with the City Prosecutors, **each violation may be thoroughly and vigorously prosecuted.**

Signature (s) _____
 Parent/Legal Guardian/Custodian Student, if 18 years of age or older

State of Ohio, County of Summit

SWORN TO AND SUBSCRIBED in my presence this ____ day of _____, 20__

(Seal)

Notary Public My commission expires _____



Twinsburg City School District

Transportation Department

Office: 330.486.2348 Fax: 330.963.0118

Email: transportationoffice@twinsburgcsd.org

11136 Ravenna Road
Twinsburg, OH 44087



TRANSPORTATION FORM

SCHOOL (Check one): ☐ THS ☐ RBC ☐ DODGE ☐ BISSELL ☐ WILCOX ☐ TAP

☐ Private School: _____

REASON (Check one): ☐ New Student ☐ Stop Change ☐ Address Change (moved)*

***Parent/Guardian must notify student's school – TRANSPORTATION CANNOT CHANGE ADDRESSES.**

STUDENT INFORMATION - TYPE OR PRINT CLEARLY

Grade: _____ Starting Date: _____ Bus: ☐ Yes ☐ No (If no, reason): _____

Last Name: _____ First Name: _____

Home Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Parent(s)/Legal Guardian(s) Name (PLEASE PRINT): _____

Parent(s)/Legal Guardian(s) Signature: _____ Date: _____

**Wilcox students MUST be met by a parent/guardian or designee at the bus stop.
Students not met will be held on the bus and returned to Wilcox.**

Alternate Pick Up/Drop Off Location: Your request may or may not be granted based on the present routing criteria.

You will be notified when your request is approved or denied.

Please allow two weeks for processing.

Name: _____ Phone: _____

Address: _____ Starting Date: _____

OR Neighborhood Stop _____

AM only _____ PM only _____ Both _____

Shared Custody Families Only:

Days: M _____ T _____ W _____ Th _____ F _____

SCHOOL OFFICE USE ONLY

IEP #08: ☐ Yes ☐ No

Wilcox Only: Preschooler: ☐ AM ☐ PM Type: ☐ IPP ☐ KPP

Reviewed by: _____ Date: _____

Harness: ☐ Yes ☐ No

TRANSPORTATION OFFICE USE ONLY

A.M. Bus # _____ Location: _____ Time: _____ Date Rcvd: _____

Noon Bus # _____ Location: _____ Time: _____ Bldg. Sec. _____

P.M. Bus # _____ Location: _____ Time: _____ Notified: _____

Reviewed By: _____ Date: _____ Approved: _____ Denied: _____ Starts: _____ Driver Notified: _____

Parent Notified: _____

This form expires at the end of the current school year.

Revised 1/16/2020

PLEASE REVIEW WEBPAGE FOR BUS STOP GUIDELINES: www.twinsburg.k12.oh.us/transportation.aspx



RENTER AUTHORIZATION FOR RELEASE OF INFORMATION

Student Name(s): _____

Grade(s): _____

Property Manager/Landlord _____

Property Name _____

Property Manager Phone Number _____

Property Manager Email Address _____

I, _____ (Parent/Guardian)

hereby authorize _____
(Landlord or Management Company or Entity)

and its agents to release any and all information regarding my rental of the property situated at
_____ (Address)

to the Twinsburg City School District and its employees and agents ("Twinsburg").

My authorization to release information includes, without limitation, authorization for the above named Landlord or Management Company or entity to provide to the Twinsburg City School District a copy of my lease and a list of the people authorized to reside with me at the above referenced property.

Renter's Signature

Print Name: _____

Date: _____



OWNER AFFIDAVIT OF RESIDENCY

(Must be completed by Homeowner if you are living with another Twinsburg family)

For the consideration that _____ may attend school in the Twinsburg City School District, I
Student's name

_____, do hereby swear and affirm that _____
Twinsburg Resident (please print) Student's name

will reside with me at my home _____ and
Street Address City State Zip Code

that Mr. and/or Mrs. _____ will also reside at the above address.
Parent's name(s)

Please read and initial each statement before signing in the presence of a Notary Public.

____ I understand that it will be my responsibility to notify the Twinsburg City School District (330-486-2000) when the above-named family no longer resides in my home/residence.

____ I understand that should any of the above statements be false, I am liable for any penalties including, but not limited to, the collection of any money owed for tuition purposes at a rate set by the Ohio Department of Education according to the Ohio Revised Code 3317.08, plus interest, administrative costs, court costs, and any attorney fees incurred in the collection of those sums and the student will immediately be withdrawn from the Twinsburg City School District. **Tuition will be charged per the current rate published by the Ohio Department of Education. Tuition for the 2023-24 school year is \$11,516.68.**

____ I agree to, and stipulate, that the Twinsburg City School District may use whatever legal means it has at its disposal to verify my residency, including having an attendance officer visit my home to ensure that the family named above, resides at this address.

NOTE: Be sure you have read this statement carefully before you sign. Giving false information under oath is punishable as a criminal offense under the Ohio Revised Code 2921.13 and 2921.21, a misdemeanor of the first degree with a maximum fine of \$1,000 and/or a jail term of six months. In cooperation with the Twinsburg City School District, each violation may be thoroughly and vigorously prosecuted.

Signature of Twinsburg Resident

Date

Printed Name of Twinsburg Resident

State of Ohio
County of Summit

SWORN TO AND SUBSCRIBED in my presence this _____ day of _____, 20____

(Seal)

Notary Public

My commission expires _____

The Twinsburg Resident must provide a deed, along with two verifying proofs of mail delivery, and current Ohio Driver's License.

**NEW HOME CONSTRUCTION/PENDING PURCHASE**

- ☐ New Home Construction (90-day clause)
☐ Pending Purchase of an existing home (90-day clause)

(To be completed by Parent/Legal Guardian for purchase of new home or pending purchase of existing home.)

You may begin the process of registering your child in the Twinsburg City School District while in the process of purchasing or constructing a residential dwelling within the boundaries of our district. Ohio law allows us to grant you 90 calendar days during which your child can attend school, tuition free, until you make your final move. The Superintendent will review your registration documentation and provide written verification regarding your child's registration.

During this transition period, you are responsible for providing transportation for your child to his/her assigned school within the Twinsburg City School District until such time as you establish residency within the district. We hope that this information is helpful to you in planning the transition of your child into our school district. If you have any question please call the Twinsburg Board of Education at 330.486.2000.

I, _____, hereby certify that I am in the process of purchasing or constructing a residential dwelling at the following:

Street Address City Zip Phone

I intend to reside in the residential dwelling at the above address when the purchase or construction is completed. I am aware that I have ninety (90) calendar days to move into my residential dwelling within the Twinsburg City School District.

Parent's Name (please print) _____ Parent's Signature _____

Child's Name _____ School/Grade _____

State of Ohio, County of Summit

SWORN TO AND SUBSCRIBED in my presence this _____ day of _____, 20____

(Seal)

Notary

My commission expires: _____

ATTACH ONE OF THE FOLLOWING LETTERS ALONG WITH A COPY OF THE SIGNED PURCHASE AGREEMENT:

- ☐ **NEW HOME CONSTRUCTION:** Letter from builder confirming that a new house is being built for the parent and that the house is at the location indicated in the parent's statement, R.C. 3313.64(f)(6)(b).
☐ **PENDING PURCHASE OF EXISTING HOME:** A letter from the real estate broker or bank officer confirming that the parent has a contract to purchase the house, that the parent is waiting upon the date of closing of the mortgage loan, and that the house is at the location indicated in the parent's statement. R.C.3313.64(F)(7)(b).

The time period for tuition-free attendance when a purchase of an existing home is pending OR a new home is being constructed cannot exceed 90 days. R.C. 3313.64(F)(7).