

**SWORN STATEMENT OF RESIDENT SEEKING CUSTODY
(to allow 60-day free enrollment)**

(ORC 3313.64 [E])

My name is _____.

I am over eighteen (18) years of age.

My home address is _____,
which is located within the _____ School District.

My home telephone number is _____.

My work telephone number is _____.

I hereby swear or affirm that I have initiated legal proceedings to obtain custody of the following child:

(name of child) (please print)

I also swear or affirm that the above information is true and accurate.

(signature)

Sworn to and signed in my presence this _____ day of _____, 20____.

Notary Public, State of Ohio

ATTACHED: Copy of court filing