



Toms River Regional Schools

Central Registration Office
54 Washington St., Toms River, NJ 08753
(732) 505 - 2600 • Fax: (732) 341-2105

Third Party Residency Form

Date: _____

This is to certify that _____ and his/her child(ren): _____,
_____, _____,
reside with _____ in his/her home at: _____,
_____, NJ.

The reason for this third party residency is: _____

_____.

I understand that State Department of Education rules stipulate that anyone who allows a child to claim false residency in their home so they can be eligible to attend school in a certain district is subject to litigation. Additionally, I also understand that back tuition can be assessed to the parent/guardian of the student found to be falsely claiming residency in the Toms River Regional Schools District.

Resident Signature

Parent/Guardian Signature

PROOF OF RESIDENCY PROVIDED:
 Primary Proof 2nd Proof 3rd Party Proof

Sworn to before me this _____
day of _____, 20____.
