



## CHANGE OF ADDRESS OR RE-ENROLLING OF STUDENT PACKET

Dear Parent/Guardian:

If you have a change of address within the Copley-Fairlawn City School District or are re-enrolling a student after having been in the Copley-Fairlawn Schools previously, please fill out the attached paperwork and bring to the Board of Education Office along with your deed/lease and two other proofs of residency (i.e. driver's license, utility bills, voter registration card, etc.)

Office hours are 7:30 AM to 4:00 PM Monday through Friday.

If you have any additional questions, please call 330-664-4800.

Sincerely,

A handwritten signature in black ink that reads "Christine McNulty". The signature is written in a cursive style.

Christine McNulty  
Central Office



Copley-Fairlawn City School District  
 3797 Ridgewood Road  
 Copley, OH 44321-1665  
 330-664-4800  
 Fax: 330-664-4811

**FORM A  
 RESIDENCY AFFIDAVIT**

For the purpose of establishing a school  
 residency. (To be completed by parent/legal  
 custodian/legal guardian/grandparent)

**TO: THE BOARD OF EDUCATION OF THE COPLEY-FAIRLAWN CITY SCHOOL DISTRICT**

I, \_\_\_\_\_, hereby certify that I am a resident of the Copley-Fairlawn City School District and, reside permanently at the following address:

Address	Apt. #	Lot #	City	Zip
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**Name of Children** (Please Print)

Last	First	M.I.	Date of Birth	School/Grade
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Last	First	M.I.	Date of Birth	School/Grade
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Last	First	M.I.	Date of Birth	School/Grade
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I further certify that:

1. This information is true, accurate, and not made up for the purpose of circumventing the attendance laws of the State of Ohio or the policies of the Board of Education requiring legal residency in order to attend the Copley-Fairlawn City Schools.
2. If I change my present address to another address that is within the Copley-Fairlawn City School District, I will immediately file another Residency Affidavit with the Board of Education of the Copley-Fairlawn City School District.
3. I understand and agree that if the above noted address ceases to be my legal residence and my new residence is outside the boundaries of the Copley-Fairlawn City School District, I will withdraw my child/children from the Copley-Fairlawn City School District and will enroll my child/children in the new district of residence.
4. If it is determined that I am not a resident of the Copley-Fairlawn City School District, I understand that my child/children will be withdrawn from the Copley-Fairlawn City School District. I will also be responsible for and will pay the current full tuition rate as determined by the Ohio Department of Education to the Treasurer of the Copley-Fairlawn City School District pursuant to Section 3317.08 of the Ohio Revised Code, for the part of the school year that my child/children were enrolled in the Copley-Fairlawn City School District. The tuition rate for the current year is \$11,992.79. The rate for the 2020-2021 school year has not been determined by ODE.

**NOTE:** I understand that providing false information under oath is a violation of Ohio Revised Code Section 2921.13 which carries a penalty of six months in jail and a one-thousand dollar fine upon conviction. Further, I am aware that any effort to circumvent the residency requirements of this school district mandated by Ohio law may result in criminal prosecution for the theft of services, a violation of the Ohio Revised Code Section 2913.02.

**NOTE: Sign only in presence of a Notary Public**

Signature of Parent/legal custodian/guardian/grandparent	Date	Relationship to Student(s)
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Parent/legal custodian/guardian/grandparent (Please print)	Social Security # of Parent/legal custodian/guardian/grandparent
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County of \_\_\_\_\_ )  
 State of Ohio \_\_\_\_\_ )

SWORN TO AND SUBSCRIBED in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

(Seal)

\_\_\_\_\_  
 Notary Public  
 My commission expires: \_\_\_\_\_



Copley-Fairlawn City School District  
 3797 Ridgewood Road  
 Copley, OH 44321-1665  
 (330) 664-4800  
 Fax: (330) 664-4811

Not Applicable \_\_\_\_\_ Initial \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF  
 INFORMATION**

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_

Phone: \_\_\_\_\_

(Landlord or Management Company or Entity) and its agents to release any and all information regarding my rental of the property situated at \_\_\_\_\_, \_\_\_\_\_, Ohio, to the Copley-Fairlawn City School District and its employees and agents ("Copley-Fairlawn.") My authorization to release information includes, without limitation, authorization for the above named Landlord or Management Company or Entity to provide to Copley-Fairlawn 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: \_\_\_\_\_

School Use Only  
 Copy to EMIS Coordinator  
 Sent \_\_\_\_\_ Initial \_\_\_\_\_



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**TRANSPORTATION FORM**  
 New/Withdrawn/Transfer  
 Student

TO: TRANSPORTATION DEPARTMENT

FROM: (Check one)  CHS  CFMS  APS  FIPS  HPS  OTHER

Transportation will begin \_\_\_\_\_

Transportation will end \_\_\_\_\_

RE: (Check one)  New  Transfer  Address Change  Phone # Change  Withdrawn

Print Clearly

Grade \_\_\_\_\_ Starting Date \_\_\_\_\_ New Student \_\_\_\_\_ Withdrawn Date \_\_\_\_\_

Student Last Name \_\_\_\_\_ Student First Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone \_\_\_\_\_ Student's Date of Birth \_\_\_\_\_

Email Address \_\_\_\_\_

Parent/Legal Guardian Name \_\_\_\_\_

School Use Only

A.M. Bus # \_\_\_\_\_ Location \_\_\_\_\_ Time \_\_\_\_\_

P.M. Bus # \_\_\_\_\_ Location \_\_\_\_\_

Noon Bus # \_\_\_\_\_ Location \_\_\_\_\_ Time \_\_\_\_\_

Review By: \_\_\_\_\_ Date \_\_\_\_\_

Copy FAXED to: Building Secretary Date: \_\_\_\_\_ Initial: \_\_\_\_\_  
 Acknowledged by Transportation Department Date: \_\_\_\_\_ Initial: \_\_\_\_\_



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**EMERGENCY NOTIFICATION SYSTEM  
CONTACT INFORMATION UPDATE**

Copley-Fairlawn City Schools uses an emergency notification system called ALERT NOW. ALERT NOW notifies families when school is called off due to inclement weather and sometimes for notification of school activities. Please only put the numbers you would want called for these instances, not individual emergency contacts (i.e. grandparents).

To update the contact information used by the emergency notification system, please return this form to the building secretary or email the information to [steve.robinson@copley-fairlawn.org](mailto:steve.robinson@copley-fairlawn.org). Please complete a new form anytime your contact information changes.

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Parent's Name \_\_\_\_\_

Building  CHS  CFMS  APS  FIPS  HPS \_\_\_\_\_

Primary Phone \_\_\_\_\_

Emergency Phone 1 \_\_\_\_\_

Emergency Phone 2 \_\_\_\_\_

Emergency Phone 3 \_\_\_\_\_

Emergency Phone 4 \_\_\_\_\_

Email 1 \_\_\_\_\_

Email 2 \_\_\_\_\_

Email 3 \_\_\_\_\_