



MISSION: Public Education in Swansea shall provide each student a safe and nurturing environment in which to develop the values, knowledge and skills needed to foster lifelong learning, achieve full potential in his or her personal, social and work life, and to contribute actively to the civic, moral and economic spirit of our diverse and changing democratic community and society.

**SWANSEA PUBLIC SCHOOLS**

ONE GARDNERS NECK ROAD

SWANSEA, MA 02777

(508) 675-1195

FAX (508) 672-1040

JFAA/JFAB-A

**LANDLORD/OWNER LIVING AGREEMENT**

To: Swansea Public Schools  
From:  
Landlord/Owner Name: \_\_\_\_\_  
Landlord/Owner Phone: \_\_\_\_\_  
Property Address: \_\_\_\_\_

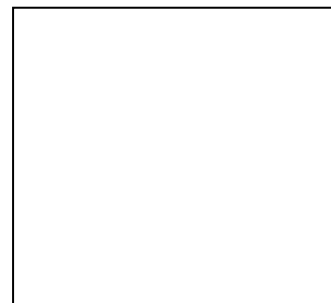
I hereby certify and swear under oath that I am the legal landlord/owner of this property.  
I also certify and swear that the following people are tenants and live at the above address:

Parent(s)/Guardian(s) Name(s): \_\_\_\_\_  
Child Name: \_\_\_\_\_  
Child Name: \_\_\_\_\_  
Child Name: \_\_\_\_\_  
Child Name: \_\_\_\_\_

I agree that if the Swansea Public Schools investigate and find these statements to be false, I may be responsible for repayment of any tuition or educational costs due to the Swansea Public Schools for the education of the above referenced children.

I agree that if the tenants listed above move out of the dwelling listed above, that I will notify the Swansea Public Schools of this change of residence. Signed under the pains and penalties of perjury:

\_\_\_\_\_  
Landlord/Owner Signature  
\_\_\_\_\_  
Print Full Name  
\_\_\_\_\_  
Date



Notary Public Stamp/Signature