



## FORM 3 - SWORN STATEMENT OF OTHER PRIMARY CAREGIVER

**This form is to be completed by a person seeking to enroll a student under the status of “other primary caregiver.” This also includes adult students and minor parents who remain in residence at the parent(s) District home.** Information provided may be verified after the child has been enrolled in the District of Columbia Public School, District Public Charter School, or other school providing educational services funded by the District of Columbia.

An “other primary caregiver” is defined as a person other than a parent, court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. For the purpose of this form, a parent is “unable to provide care and support” to a child if one of the conditions described below apply. A person seeking to enroll a student as an “other primary caregiver” shall provide documentation, including this sworn statement, which establishes his or her status as BOTH an “other primary caregiver” AND his or her residency in the District of Columbia as required by DC law and regulations.

I, \_\_\_\_\_, certify that I am a District of Columbia resident, and my primary place of residence at  
(Other Primary Caregiver Name)

\_\_\_\_\_. I am the other primary caregiver of  
(Address)

\_\_\_\_\_ who resides with me at the above referenced address.  
(Student Name)

I am the child’s primary caregiver because his/her parent, custodian or guardian, \_\_\_\_\_,  
(Parent/Custodian/Guardian Name)

who currently resides at \_\_\_\_\_,  
(Parent/Custodian/Guardian Address, if applicable)

is unable to provide primary care and support because (check any that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> he/she has abandoned the child                                  | <input type="checkbox"/> he/she has an active military assignment |
| <input type="checkbox"/> he/she does not live with the child due to neglect and/or abuse | <input type="checkbox"/> he/she suffers from a serious illness    |
| <input type="checkbox"/> he/she is incarcerated  | <input type="checkbox"/> he/she is deceased                       |

*If none of the above descriptions apply, please use another means listed on the Other Primary Caregiver Verification Form to prove “other primary caregiver” status.*

What is your relationship to the child? \_\_\_\_\_

On what date did the child come under your primary care and support? \_\_\_\_\_

**I solemnly affirm under the penalties of perjury that the contents of the foregoing are true to the best of my knowledge, information and belief.**

\_\_\_\_\_  
Other Primary Caregiver Name (Print)

\_\_\_\_\_  
Other Primary Caregiver Signature

\_\_\_\_\_  
Date



**This section must be completed by a school official ONLY. School officials should only collect and complete this form if the person enrolling the student is NOT the parent, legal guardian, or court appointed custodian of the student.**

An “other primary caregiver” is a person other than a parent or court-appointed custodian or guardian who is the primary provider of care and support to a child who resides with him or her, and whose parent, custodian, or guardian is unable to supply such care and support. Other primary caregivers must establish DC residency as required on the DC Residency Verification Form, in addition to establishing his/her status as an “other primary caregiver”. The following are examples of when an “other primary caregiver” status applies, including but not limited to:

- Parent has abandoned the child
- Does not live with the child due to neglect and/or abuse
- Parent suffers from serious illness
- Parent is incarcerated
- Parent is deceased
- Parent is on active military assignment

**I hereby certify that the caregiver listed above has confirmed “other primary caregiver” status using one (1) of the choices above and presented one (1) of the following documents verifying his/her status as an “other primary caregiver”:**

1. \_\_\_ Records from the previous school year indicating that the student is in the care of the caregiver, including, but not limited to, a signed report card;
2. \_\_\_ Immunization or medical records issued within the last twelve (12) months immediately preceding the school’s review of the residency documentation, indicating that the student is in the care of the caregiver;
3. \_\_\_ Unexpired official documentation from the federal government or the Government of the District of Columbia with an issue date within the last twelve (12) months immediately preceding the school’s review of residency documentation, indicating that the caregiver receives public or medical benefits on behalf of the student, including, but not limited to, Supplemental Security Income annual benefits notification or TANF verification of income notice or recertification approval letter,
4. \_\_\_ A completed and signed Sworn Statement of Other Primary Caregiver form (issued by OSSE) indicating that he/she is the primary caregiver for the student; or
5. \_\_\_ An Attestation for Other Primary Caregiver form (issued by OSSE) completed and signed by a legal, medical or social service professional attesting to the caregiver’s status relevant to the student and issued within the last twelve (12) months immediately preceding the school’s review of residency documentation.

I certify, under the penalty of perjury, that I have personally reviewed the documents presented and affirm that the information represented above pertaining to other primary caregiver verification is true to the best of my knowledge, information, and belief. I also affirm that all supporting documentation to this form will be retained by the school and made available to OSSE, external auditors, and other agencies including but not limited to the DC Office of the Inspector General, DC Office to the Attorney General, etc. upon request.

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School Official Name (Print)

School Official Signature

Date

**Penalty for False Information:**

Any person, including any District of Columbia public school or public charter school official, who knowingly supplies false information to a public official in connection with student residency verification shall be subject to charges of tuition retroactively, and payment of a fine of not more than \$2,000 or imprisonment for not more than 90 days, but not both fine and imprisonment, pursuant to the District of Columbia Nonresident Tuition Act, approved September 8, 1960 and amended by the District of Columbia Public Schools and Public Charter School Student Residency Fraud Prevention Amendment Act of 2012 (D.C. Code §38-312). The case of any such person may be referred by the Office of the State Superintendent of Education to the Office of the Attorney General.