



www.ucasd.org

Union City Area School District

107 Concord Street
Union City, Pennsylvania 16438

(814) 438-3804
Fax: (814) 438-2030

PARENTAL REGISTRATION STATEMENT

Student Name: _____
Date of Birth: _____ Grade: _____
Address: _____
Parent or Guardian Name: _____
Telephone Number: _____

Is this student currently on probation? ☐ YES or ☐ NO

If yes, please list county and state probation department: _____

Pennsylvania School Code §13-1304-A states in part “Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration provide a sworn statement or affirmation stating whether the pupil was previously or is presently suspended or expelled from any public or private school of this Commonwealth or any other state for an action of offense involving a weapon, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property.”

Please complete the following:

I hereby swear or affirm that I am the parent/guardian, or other person having lawful charge of the above-named student, and that he/she is a lawful resident of the Union City Area School District. I also swear or affirm that my child:

Was ☐ /was not ☐ **previously** suspended; or, was ☐ /was not ☐ **previously** expelled

Is ☐ /is not ☐ **presently** suspended; or, is ☐ /is not ☐ **presently** expelled

from any public or private school of this Commonwealth or any other state for an act or offense involving weapons, alcohol or drugs, or for the willful infliction of injury to another person or for any act of violence committed on school property. I make this statement subject to the penalties of 24 P.S. §13-1304-A(b) and 18 Pa. C.S.A. §4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief.

If this student **has been** or **is presently suspended or expelled** from another school, please complete:

Name of the school from which student was or is suspended/expelled: _____

Date(s) of suspension: _____ Date(s) of expulsion: _____

Reason for suspension/expulsion: _____

Signature of Parent/Guardian

Date

Any willful false statement made herein shall be a misdemeanor of the third degree. This form shall be maintained as part of the student's disciplinary record.

Updated 9/2018