



188 Crest Haven Road-Cape May Court House-NJ-08210 Ph. 609-380-0200-Fax 609-465-4962
Dr. Nancy Hudanich, Superintendent

Affidavit of Residence

Date_____

I, _____, hereby certify that I am currently

a resident of Cape May County.

I certify that all of the answers are correct and accurate.

Signature_____ Date_____