



AFFIDAVIT OF SUCCESSFUL COMPLETION OF HOME STUDY PROGRAM

Applicant (Full Legal Name) \_\_\_\_\_ Social Security Number \_\_\_\_\_

ATTESTATION OF APPLICANT

I, \_\_\_\_\_, hereby swear or affirm that I received the attached home study diploma pursuant to my successful completion of a home study program as recognized by applicable Georgia Law.

Applicant

Signature of Applicant

Notary Public / Seal

Date

ATTESTATION OF PARENT / GUARDIAN

I, \_\_\_\_\_, hereby swear or affirm that \_\_\_\_\_, my child / ward, received the attached home study diploma on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_, pursuant to his/her successful completion of a home study program as recognized by applicable Georgia Law.

Parent or Legal Guardian

Applicant

I further swear of affirm that the home study program completed by my child / ward was administered by a person or persons duly qualified to administer such a program under applicable Georgia Law.

Signature of Applicant

Notary Public / Seal

Date