

RESIDENTIAL AFFIDAVIT

THIS FORM SHALL BE COMPLETED BY AN ADULT WITH WHOM THE STUDENT'S FAMILY IS LIVING.

This form shall be completed for students living in the Stephens County School District who live with parents or guardians, but cannot provide proof of physical residence in that person's name. A utility bill with the physical address and the name of the person completing this form is also required.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

My Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cellular Phone: _____

The name child's parent(s) or guardian residing in my residence is: _____

The School District's Superintendent, or his/her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the District. The audit may also include a personal visit by a District attendance officer or other employee of the District at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the District discovers fraud or misrepresentation, student shall be withdrawn from school.

I attest that this request to attend school in Stephens County is not primarily related to attendance at a particular school in the Stephens County School District *nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.*

I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify Stephens County School System.

NOTICE OF PENALTIES AND LIABILITY:

I understand that:

1. If I falsify information or defraud the Stephens County School System on this affidavit, I will be obligated to pay for the costs incurred by the District for the period during which the ineligible student is enrolled, and shall remunerate the District as set forth in O.C.G.A. § 20-2-133 (a). (initial)
2. If the costs incurred by the District are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same. (initial)
3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1. (initial)

4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2. (initial)

5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20. (initial)

6. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71. (initial)

7. By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions. (initial)

I SOLEMNLY AFFIRM UNDER THE PENALTIES LISTED ABOVE THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Signature of affiant (adult with whom the family is living)

Signature of parent/guardian

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| <p>PLEASE NOTARIZE</p> <p>Sworn to and subscribed before me this _____ day of _____, 20____.</p> <p>Notary Public: : _____.</p> | <p>Name of Affiant (Adult with whom the family is living) (Please Print): _____.</p> |
| | <p>Parent/Guardian/Enrolling Person Signature: _____.</p> |
| <p>Principal/Designee Signature: _____.</p> | |

6/13/07