Hampton County School District

Student(s):

Parent(s) / Guardian(s):

In accordance with the law of the state of South Carolina, I certify that the **student(s)** named above are **legal residents of Hampton County School District and reside at** 

The following proof of residence is attached. (If the p than the parent or guardian, the person whose nar certification at the bottom of this form.)	· · · · · · · · · · · · · · · · · · ·		
Utility bill with physical address.	I understand that if it is found that I have willfully and knowingly sworn to false information in this affidavit, that pursuant to Section 16-9-30 of the South Carolina Code of Laws, I may be found guilty of a felony and, upon conviction must be fined at the discretion of the court of imprisoned for not more than five years, or both.		
Lease / rental agreement Property tax receipt with physical home address. Parent / Guardian Signature: Date:			
		Insert the name of the resident who is NOT the parent / guardian and	d whose name is on the proof of residency.
		I,, certify that	that the above named student(s)
 The student(s) relationship to me is I understand that if it is found that I have willfully and I this affidavit, that pursuant to Section 16-9-30 of the So found guilty of a felony and, upon conviction must be f imprisoned for not more than five years, or both.	knowingly sworn to false information in outh Carolina Code of Laws, I may be		
NOTARY	(Signature)		
Sworn to before me this			
day of, 20			
(I.S.)			
Notary Public for South Carolina			
My Commission Expires:			