

NOTE: To be used for any student seeking to transfer into the district who lives with Parent(s) / Guardian / Legal Custodian

AFFIDAVIT A

STATE OF NORTH CAROLINA)
COUNTY OF BUNCOMBE)

Please Print or Type

IN THE MATTER OF				DISCIPLINARY STATUS AFFIDAVIT BY PARENT, GUARDIAN OR LEGAL CUSTODIAN (G.S. 115C-366(a4)) (Policy Code 4115)
Full Name of Student				
Address				
City		State	Zip	
Current Grade	Last School Attended			
Sex	Date of Birth	Age	Printed Name of Parent, Guardian or Legal Custodian	

This is to certify that the above-referenced student who is transferring to:

_____ (Name of School)
from _____ (Name of School)

Check One:

- is not currently under suspension or expulsion from attendance at a private or public school in this or any other state and has never been convicted of a felony in this or any other state; or
- is currently under suspension or expulsion from attendance at a private or public school in this or any other state or has been convicted of a felony in this or any other state, but is currently identified as being eligible for special education and related services under the Individuals with Disabilities Education Improvement Act, 20 U.S.C. § 1400, et seq. (2004). *If this box is checked, you must attach evidence of the student's current eligibility.*

Sworn Under Oath or Affirmation.

Signature of Parent/Guardian/Custodian/Student
(if 18 yrs. of age or older)

SWORN TO AND SUBSCRIBED BEFORE ME

This ____ day of _____, 20____.

by _____
(Name of Parent, Guardian, Legal Custodian or Student)

(Signature of Notary Public)

My Commission Expires: _____
(Notary Seal)