



WAIVER OF STUDENT SOCIAL SECURITY NUMBER REQUIREMENT

STUDENT NAME: _____ GRADE: _____

I, _____ PARENT OF _____

DO NOT WISH TO GIVE MY CHILD'S SOCIAL SECURITY NUMBER AS PART OF THE REGISTRATION
DOCUMENTS AT COWETA CHARTER ACADEMY.

NOTICE TO PARENT: Waiver of Social Security number requirement will not be the cause of any refusal to enroll a student, or withdrawal of a student at any point. Due to the lack of Social Security Number, your child will be assigned a permanent student identification number for purposes of maintaining and tracking a student's educational records.

Parent/Guardian Signature

Date

SWORN TO AND SUBSCRIBED BEFORE ME,
THIS THE _____ DAY OF _____, 20____

Notary Public

Original Date: 8/16
Revised: 11/3/2020

Coweta Charter Academy
6675 E Highway 16 Senoia, GA 30276
770-727-5959 FAX 770-727-5949