

**Troup County School System
Affidavit of Residency**

Full names of parent/guardian: _____

Home phone: _____ **Work phone:** _____ **Cell phone:** _____

Current full time address: _____ **City:** _____

Children	Date of Birth	Children	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____

Proof of residence documentation presented and attached (check one):
___ Current and valid lease or rental agreement, most recent utility or telephone bill
___ Deed establishing home ownership, most recent utility bill or telephone bill

Affidavit of Residency

The undersigned, first being duly sworn, and under penalty of law deposes that all the information given in this Affidavit as follows is true and correct.

1. That I am the parent/court appointed guardian of each child listed above. _____(Initial)
2. That each child listed above resides with me full time at the address listed above. ___ (Initial)
3. That I am the legal renter, lessee or owner of the property listed above. _____ (Initial)
4. That I understand a student enrolled in Troup County Schools under falsified information is illegally enrolled and will be immediately withdrawn from school. _____ (Initial)
5. That I and the children listed above are bona fide, full time residents of Troup County, Georgia. _____(Initial)
6. That I understand that making false statements or submitting false documentation to the Troup County School System and false swearing is a violation of O.C.G.A. §16-9-2, §16-10-20 and/or §16-10-71 of the criminal laws of the State of Georgia and punishable 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. O.C.G.A. 16-10-71. _____ (Initial)

Sworn to and subscribed before me this ____ This ____ day of _____, 20 ____.
day of _____, 20 ____.

Signature of the Notary Public

Signature of the Parent/Guardian

The following section should be completed when the registering parent does not have a proof of address in their name and resides with another Troup County resident.

I am the legal renter, lessee or owner of the property listed above. _____ (Initial)

The persons listed in this document are residing with me and have my consent to live full time at the address listed above. _____ (Initial)

Signature of renter/lessee/owner

Sworn to and subscribed before me
this ____ day of _____, 20 ____

Date

Signature of Notary Public

**This affidavit is valid for _____ school year and will expire on _____
Date**