AFFIDAVIT OF RESIDENCY IN THE NAME OF ANOTHER

DeKalb County

Expiration Date

This form is used to confirm an individual's address when official documentation is unavailable.

Signature of Primary Owner/Renter

Part A: Affidavit of Parent/Guardian			School District	
Full Name of Parent/Guardian:	Phone Number:			
Current Address:	City:	Sta	State/Zip:	
Student(s) Name	Date of Birth	School Attending		
Proof of residence documentation. You must provide a copy of showing the same address listed on the affidavit, along with this for			f mail addressed to you,	
Before the undersigned officer, and being first duly sworn, I d	epose, and state as follows:			
 That I am the parent/court appointed guardian of each child I: That each child listed above resides with me full time at the a That I understand that I must immediately notify DeKalb Couresidence. That I understand that representatives of DeKalb County Sch consent to these visits. That I understand that a student enrolled in DeKalb County Simmediately withdrawn from school. That I understand that false swearing is a violation of the law imprisonment for up to five years or both. O.C.G.A. 16-10-7 That I understand that this affidavit is valid for the current so the DeKalb County School District Board of Education Police 	address listed above. unty School District if I change nool District may visit my home School District under falsified in vs of the State of Georgia, punish 11. hool year only and will be in eff	to verify residency, and formation is illegally en hable by a fine of not mo	I I hereby voluntarily arolled and will be ore than \$1,000.00 or by	
Signature of Parent/Guardian Date	Signature of the No	otary Public	Expiration Date	
Part B: Affidavit of Primary Owner/Renter				
Full Name of Primary Owner/Renter:	Phone Number:			
Current Address:	City:	State/Zip:		
Proof of residence documentation. You must provide a copy of this form for submission to DeKalb County School District. One property address). The second proof must be a utility bill dated wi electricity, or residential phone services.	proof must be a mortgage statem	nent, lease, or deed (mus	st include your name and the	
Before the undersigned officer, and being first duly sworn, I d	-			
 That I am the legal owner, landlord of the property listed abo That the persons listed are residing with me or have my const That I understand that I must immediately notify DeKalb Cou That I understand that representatives of DeKalb County Sch consent to these visits. That I understand that a student enrolled in DeKalb County S immediately withdrawn from school. That I understand that false swearing is a violation of the law imprisonment for up to five years or both. O.C.G.A. 16-10-7 That I understand that this affidavit is valid for the current so residence as required by the DeKalb County School District I 	ent to live full time at the addressunty School District if any personal District may visit my home School District under falsified in as of the State of Georgia, punished the state of Georgia in the bool year only and will be in effective to the state of Georgia.	on listed above should cl to verify residency, and formation is illegally en hable by a fine of not mo	I hereby voluntarily arolled and will be ore than \$1,000.00 or by	

Date

Signature of the Notary Public