Deadline: return before Sept. 22, 2008

State of Georgia
County of Fulton
*Affidavit of Residence for
New Enrollees ~~and Students~~
~~Entering 6th or 9th Grade~~

The undersigned, first being duly sworn, deposes and states that he/she is the parent/guardian of _____
Student
_____, and said student lives with the undersigned, and that both
Student
the student and the undersigned are bona fide full time residents of Fulton County and that they reside at

_____,
Street **City** **Zip Code**

Fulton County, Georgia with _____.
Name of homeowner/apartment lessee

The undersigned further agrees that he/she will notify the Fulton County Board of Education if the parent and/or student ever terminate the above residence in Fulton County while the student is enrolled in a Fulton County school.

If it is determined that the student does not live in the appropriate school district, he/she will be withdrawn from school immediately.

_____	_____
Signature of Parent/Guardian	Signature of Homeowner/Apartment Lessee
_____	_____
Print Name of Parent/Guardian	Print Name of Homeowner/Apartment Lessee

Sworn to and subscribed before this _____ day of _____, 200___.

_____ (Notary Public) My Commission expires _____

***False swearing is a violation of the laws of the State of Georgia, punishable by a fine of not more than $1,000, or by imprisonment for not less than one nor more than five years, or both. Georgia Code (O.C.G.A. 16-10-71).**

When using this form you must bring two additional documents from the list below bearing the name of the person who signed above as the owner of the house or lessee of the apartment in order to register.

Acceptable Documentation

- **Copy of home mortgage payment book**
- **Current utility bill (gas, electric, or water)**
- **Apartment lease showing name of the lessee**
- **Homeowner's/Renter's insurance registration card**
- **Current bank statement**
- **Copy of home contract**
- **Receipt to have utilities connected**
- **Current paycheck stub**

Grade: _____

School Name: __Hembree Springs Elementary_____