Rockdale County School Public Schools
Affidavit of Residency

Full names of parents/guardians: ________________________________

Home phone: __________________ Work phone: __________________ Cell phone: ________________

Current full-time address: __________________________________________

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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. I am the parent/court appointed guardian/legal custodian of each child listed above. _____ (Initial)
2. Each child listed above resides with me full-time at the address listed above. _____ (Initial)
3. I and the children listed above are bona fide, full time residents of Rockdale County, Georgia. _____ (Initial)
4. I understand that it is the policy of the Rockdale County School District to admit only students living within its boundaries. _____ (Initial)
5. I understand a student enrolled in Rockdale County Schools under falsified information is illegally enrolled and will be immediately withdrawn from school. I further understand that a parent is legally responsible for tuition of a student illegally attending school. If past tuition is collected by an attorney, I understand that the parent is legally liable for all expenses of litigation, including attorney’s fees. _____ (Initial)
6. I will immediately notify my child’s school if our residence changes. _____ (Initial)
7. I understand that making false statements or submitting false documentation to the Rockdale County School District and false swearing is a violation of O.C.G.A. §16-10-20 and/or 16-10-71 and is 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. _____ (Initial)

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

__________________________________________________________
Signature of Notary Public

This _____ day of ______________________, 20_____.

__________________________________________________________
Signature of 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 Rockdale County resident.

1. I am the legal owner or property manager of the property listed above. _____ (Initial)
2. The persons listed in this document are residing with me and/or have my consent to live full time at the address listed above. _____ (Initial)

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

__________________________________________________________
Signature of Notary Public

This _____ day of ______________________, 20_____.

__________________________________________________________
Signature of Owner/Property Manager

Printed Name: ____________________________

Phone number: ____________________________