

# NOTICE

## Gwinnett County Public Schools Notarized Residency Affidavit

*ONLY TO BE FILLED OUT IF THE STUDENT'S FAMILY IS RESIDING IN THE HOME OR APARTMENT  
OF ANOTHER INDIVIDUAL.*

### **CHECKLIST OF DOCUMENTS NEEDED:**

- MUST** be signed by homeowner/lease holder **AND** parent and **notarized**.
- MUST** provide a copy of picture id of homeowner **AND** parent.
- MUST** provide a copy of residency – please see attached sheet for acceptable documentation.
- MUST** provide a copy of **current** gas, water or electric bill of homeowner.
- MUST** provide one piece of business mail in the parent/guardian's name at the address they are living.
  - New enrollees have 30 days to submit this document
- IF** homeowner is leasing, the apartment manager/leasing agent **MUST** sign this form on the first page – highlighted box.

### **NOTE: Residency Affidavits must be renewed annually.**

This notarized document will constitute a legal document. GCPS reserves the right to investigate and verify the accuracy of all information provided. Any falsified information discovered will be turned over to officials and individuals can be held responsible for penalties and liability as set forth in O.C.G.A. 20-2-133 (see page 3 of the Residency Affidavit).

**\*\*\* This affidavit is valid for one school year \*\*\***

GWINNETT COUNTY PUBLIC SCHOOLS  
NOTARIZED RESIDENCY AFFIDAVIT  
DOE Rule 160-5-1-.28  
GCPS Procedure JBA

**This form shall be completed for students seeking enrollment in Gwinnett County Public Schools, who live with their parents or legal guardians, but reside in the home of another adult. Residency Affidavits should be resubmitted annually at least 2 weeks prior to the beginning of each school year.**

**This form shall be completed by the adult with whom the student and parent/guardian are living.**

**I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.**

**The student whose legal name is \_\_\_\_\_  
and whose birth date is \_\_\_\_/\_\_\_\_/\_\_\_\_ lives with me at the following address:  
(day/month/year)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **GA** **Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Apartment Manager/Landlord Witness Signature**

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**1. Reason the student is living with above named adult (check one or as many as apply)**

**A. \_\_\_\_\_ The loss or inhabitability of the student's home as a result of a natural disaster.**

**B. \_\_\_\_\_ The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.**

**C. \_\_\_\_\_ Other circumstances (explain below):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**2. The name and last known address of the child's parent(s) or legal guardian:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**3. This student began 24 hours per day and seven days per week residency in my home on**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(day/month/year)

**4. The name and address of the last school that the student attended is:**

**Name of School:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**5. The Superintendent of Gwinnett County Public Schools or his or her designee may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system. The audit may also include a personal visit by a school district attendance officer or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school.**

**Assurances:**

- 1. I attest that this request to attend \_\_\_\_\_ School is not primarily related to attendance at a particular school, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or any other similar reason.**
- 2. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion from his/her most recent school.**
- 3. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.**

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**NOTICE OF PENALTIES AND LIABILITY**

**I understand that:**

**If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the cost incurred by the local school system for the period during which the ineligible student is enrolled and shall remunerate Gwinnett County Public Schools as set forth in O.C.G.A. 20-2-133 (a) \_\_\_\_\_ (Initial)**

**If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same \_\_\_\_\_ (Initial)**

**I may be prosecuted, held criminally liable and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. 16-9-1. \_\_\_\_\_ (Initial)**

**I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both if I am found guilty of false swearing pursuant to O.C.G.A. 16-10-71. \_\_\_\_\_ (Initial)**

**By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions.**

**I solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information and belief.**

\_\_\_\_\_  
**Signature of affiant (adult with whom the child/parent is living)**

\_\_\_\_\_  
**Signature of parent/legal guardian**

**State of: \_\_\_\_\_, County of: \_\_\_\_\_**

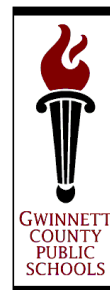
**I, \_\_\_\_\_, a Notary Public for said county and state do hereby certify that \_\_\_\_\_ & \_\_\_\_\_ personally appeared before me this day and acknowledged the due executing of the foregoing instrument.**

**Witness my hand and Official Seal, this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_**

\_\_\_\_\_  
**Signature of Notary**

\_\_\_\_\_  
**Seal**

# 2019-20 DOCUMENTS REQUIRED FOR SCHOOL REGISTRATION



## Proof of Student's Age

Present **one** of the following:

- A certified copy of a birth certificate; or
- A federal, state, county, or school document **with date of birth.**  
*Examples include a certified, hospital-issued birth record or birth certificate; military ID; valid driver's license; passport; adoption record; religious record, signed by an authorized religious official; official school transcript; official immigration documentation; or affidavit of age sworn by parent/guardian or other authorized person accompanied by a certificate of age signed by a licensed, practicing physician which states the physician has examined the child and believes the age, as stated in the affidavit, is substantially correct.*

For a fee, parents can order a birth certificate for a child born in Georgia through the state's ROVER service.

<http://gta.georgia.gov/rover>

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## Proof of Authorized Person to Enroll

The following persons are authorized to enroll students:

- Parent (natural or adoptive)
- Legal guardian
- Grandparent with a properly executed power of attorney for the care of a minor child
- Kinship caregiver with a properly executed Kinship Caregiver Affidavit
- Foster parent appointed by a state agency
- Sponsor for approved International Exchange Program

The person authorized to enroll should present **one** of the following:

- Driver's license
- State identification card
- Passport
- Other official photo identification

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## Proof of Residency

(Present one from **Column A** and one from **Column B** to show that a family lives in the attendance zone.)

**Column A:** Present **one** of the following (must include address):

**AND**

**Column B: One** of the following:

- Non-contingent sales contract
- Current lease/rental agreement
- Most recent income tax return
- Current paycheck stub
- Current residential property tax statement or bill
- Current warranty or quit claim deed
- Current home purchase agreement
- Current homeowner's insurance policy
- Current gas bill
- Current water bill
- Current electric bill

### Important information about Proof of Residency documents

- Documents presented for residency verification must include the same address as the accompanying utility bill.
- The bill must have the name and address of the enrolling parent/guardian.
- A telephone bill is not acceptable.
- A contingency sales contract is not acceptable.
- Exception: A deed without an address is acceptable if accompanied by two utility bills (excluding telephone bills) with same address in attendance zone.

(continued)

**Residency Affidavit:** *If the student's family is residing in the home or apartment of another individual, the following is necessary for enrollment:*

1. **Notarized third-person affidavit of residency** (available at school) including:
    - Signature of person with whom the family is living,
    - Signature of parent/legal guardian of student, and
    - Apartment manager's signature, if applicable.
  2. **Two forms of Proof of Residency for person with whom family is living**  
(*See Proof of Residency section. Present one from each column.*)
  3. **One piece of business mail in the parent/legal guardian's name with the address of the home or apartment in which the student is residing.** (*This must be provided within 30 days of enrollment.*)
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### **Immunization/ Health Certificates**

- **Valid certificate of immunization (Ga. Health Dept. Form #3231), or a notarized Affidavit of Religious Exemption (Department of Health Form #2208 – available from the local school) is required for enrollment.** The certificate of immunization must be completed by the health department or your health care provider. A valid Form #3231 must be marked with either "Date of Expiration" or as "Complete for School Attendance." (A certificate marked with a "Date of Expiration" expires on the date indicated. A current certificate must be submitted within 30 days of expiration.) A medical exemption, if applicable, should be noted on Form #3231 with a current date of expiration.
  - **Vision, Hearing, Dental and Nutrition Screening (Ga. Health Dept. Form #3300, rev. 2013),** available from the health department or your doctor/dentist. Letters from appropriate healthcare professionals and out-of-state certificates are acceptable, if completed within the last 12 months and stapled to the state form.
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### **Previous School Records**

- Report cards or official school transcript
- Withdrawal form from previous school
- Discipline records for students enrolling in grades 7-12