AFFIDAVIT OF RESIDENCE



INSTRUCTIONS

This statement must be notarized prior to arrival. Please attach a current electric, water, public gas bill, or signed lease/purchase contract. This document is necessary to show proof of residence.

de traducción مة gratuitos para ف comprender los ليات procesos escolares, ليات llame al (919) 852-3303	Si vous avez Si vous avez خدمات الترج besoin de services de traduction gratuits pour comprendre les procédures scolaires, appelez 2019 852-3303 Je (919) 852-3303	यदि आपको वियालय की प्रक्रियाओं को समझने के लिए निःशुल्क अनुवाद सेवाएं चाहिए, तो (919) 852-3303 पर कॉल करें	학교/교육 과정에 관한 무료 번역 서비스가 필요하시면 다음 번호로 연락하여 주십시오 (919) 852-3303	Nếu quý vị cần sự thông dịch miển phí để hiểu phương pháp trường học, xin vui lòng gọi số điện thoại (919) 852-3303	如果您需要 免费翻译服 务来了解学 校流程,请 致电 (919) 852-3303
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INFORMATION ON PROOF OF RESIDENCE

The	NAME OF STUDENT'S FAMILY	family is residing with	_
at	STREET ADDRESS, APARTMENT NUMBER, CITY, STATE, ZIP C	ODE	
Att	ached is a current electric, water, public gas bill, or signed le	ease/purchase contract. This document is necessary only to show proof of residence	
for	NAME OF CHILD/CHILDREN ATTENDING SCHOOL	to attend WCPSS schools.	
	Both signatures below must be notarized. Signature of the Parent/Court-Appointed Custodian	Date	_

PARENT OR COURT APPOINTED CUSTODIAN AFFIDAVIT

Is this a temporary living arrangement due to loss of housing, economic hardship or similar reason?

Yes No (If YES, your data manager will notify the school's social worker and they may contact you for additional information.) Initial below:

____ I verify that the information contained on this form is true and accurate.

Signature of the Residence Provider

_ I verify that any information/documentation I have provided in support of this information is true and accurate.

I attest that the information contained in this document is true and accurate and I understand that if school officials determine that I have misrepresented any material information in this form, this school assignment will be revoked and my child will be immediately assigned to his/her correct school.

Signature of the Parent/Court-Appointed Custodian

__ Date __

Date ____

TO BE COMPLETED BY A NOTARY PUBLIC

State of North Carolina	County of:				
۱	a Notary Public for said County and State, do hereby certify				
that	and				
personally appeared before me and acknowledged the due execution of the foregoing instrument.					
Witnessed my hand and seal this	_ day of ,				
Signature of Notary	My Commission Expires				