



## Certificate of School Enrollment

### Part A: Student Information

Student **Legal** Name (Last, First, Middle): \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Part B: School Information

School Name: Americus Sumter High School Phone #: 229-924-3653

Address: 805 Harrold Avenue State: GA. Zip Code: 31709

### Part C: Enrollment Certification

This record is to certify that the above named student is:

- Enrolled in and not under expulsion from a public or private school.

### Part D: Restoration of Driving Privileges Following School Suspension

This record is to certify that:

- The above named student terminated his/her secondary education as of \_\_\_\_\_ (date).  
Please complete one of the following if a date is entered above:
  - The student has re-enrolled in this school as of \_\_\_\_\_ (date) OR
  - The student will present proof of pursuit or completion of a GED, high school diploma, special diploma, or certificate of high school completion, or proof of enrollment in a postsecondary school.

**OR**

- The notice of school suspension/non-compliance was sent in error by this school.

### Part E: Signatures

Certifying Official (PRINT NAME): \_\_\_\_\_

Official's Title: \_\_\_\_\_

Original Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

Signature: \_\_\_\_\_

Notary Public Seal

*Within thirty (30) days, submit this original form to a Department of Driver Services Customer Service Center.*