

STATE OF NORTH CAROLINA

_____ County

IN THE MATTER OF:

Name

Address

City

State

Zip

Sex

Date of Birth

**EDUCATIONAL RESIDENCY
AFFIDAVIT**

(PARENT OR LEGAL GUARDIAN)

G.S. 115C-366

The undersigned being duly sworn says:

1. I am the parent or legal guardian of the child(ren) listed below:

Full Name of Child(ren)	Age

2. My child(ren) resides with the adult (hereinafter custodial adult) listed below and the custodial adult is a resident of the school district listed below:

Custodial Adult	School District

3. My child resides with the custodial adult for the following reason(s) (check all that apply):
- a. The death, serious illness, or incarceration of a parent of legal guardian, or
 - b. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance; or
 - c. Abuse or neglect by a parent or legal guardian; or
 - d. The physical or mental condition of a parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student; or
 - e. The loss or inability of the student's home as the result of a natural disaster; and

4. This student is not currently under a term of suspension or expulsion from a school for conduct that could have led to a suspension or an expulsion from the local school administrative unit; and
5. This student's claim of residency in the unit is not primarily related to attendance at a particular school within the unit; and
6. The custodial adult has been given and accepts responsibility for educational decision for the child, including receiving notices of discipline under G.S. 115C-391, attending conferences with school personnel, granting permission for school-related activities, and taking appropriate action in connection with student records.

WARNING OF PENALTY

IF IT IS FOUND THAT THE INFORMATION CONTAINED IN THIS AFFIDAVIT IS FALSE, THEN THE LOCAL BOARD MAY, UNLESS THE STUDENT IS OTHERWISE ELIGIBLE FOR SCHOOL ATTENDANCE UNDER OTHER LAWS OR LOCAL BOARD POLICY, REMOVE THE STUDENT FROM THE SCHOOL. IF A STUDENT IS REMOVED FROM SCHOOL, THE BOARD SHALL PROVIDE AN OPPORTUNITY TO APPEAL THE REMOVAL UNDER THE APPROPRIATE POLICY OF THE LOCAL BOARD AND SHALL NOTIFY ANY PERSON WHO SIGNED THE AFFIDAVIT OF THIS OPPORTUNITY. IF IT IS FOUND THAT A PERSON WILLFULLY AND KNOWINGLY PROVIDED FALSE INFORMATION IN THE AFFIDAVIT, THE MAKER OF THE AFFIDAVIT SHALL BE GUILTY OF A CLASS 1 MISDEMEANOR AND SHALL PAY TO THE LOCAL BOARD AN AMOUNT EQUAL TO THE COST OF EDUCATING THE STUDENT DURING THE PERIOD OF ENROLLMENT. REPAYMENTS SHALL NOT INCLUDE STATE FUNDS.

SWORN AND SUBSCRIBED TO BEFORE ME	Signature of Affiant
Date	
Signature	Date
Title of Person Authorized to Administer Oaths	