

WILSON COUNTY

Affidavit for Admission of a Student Domiciled in Wilson County
Who is Transferring Into Wilson County Schools

I state under oath that the following facts are true and correct:

1. My name is _____.
2. My street address is _____.
My mailing address is _____.
My telephone numbers are: (Home): _____;(Work): _____;(Cell): _____.
3. I am enrolling the following child in the Wilson County Schools: _____.
4. I am the parent/legal guardian (**circle one**) of the child.
5. The name of the last school my child attended is _____,
which is located in _____.
6. The child is/is not (**circle one**) currently under a term of suspension or expulsion from a school for conduct that could have led to a suspension or expulsion from the Wilson County Schools.
 - a. If the child is currently under a term of suspension or expulsion from a school for conduct that could have led to a suspension or expulsion from the Wilson County Schools, the child is (**check one**):
 - identified as eligible for special education and related services (evidence of current eligibility must be tendered with affidavit), or
 - not identified as eligible for special education and related services.
7. The child has/has not (**circle one**) been convicted of a felony in North Carolina or any other state or territory.

I understand that if the information in this affidavit is false, the child may be removed from school. The school system will give notice of an opportunity to appeal the removal in accordance with school system policy. I UNDERSTAND THAT IF I HAVE PROVIDED FALSE INFORMATION IN THIS AFFIDAVIT, I MAY BE FOUND GUILTY OF A CLASS 1 MISDEMEANOR AND MAY HAVE TO PAY THE WILSON COUNTY SCHOOLS AN AMOUNT EQUAL TO THE COST OF EDUCATING THE CHILD DURING THE PERIOD OF ENROLLMENT.

Parent or Guardian of Child

STATE OF _____
COUNTY OF _____

I, _____, a Notary Public of the County and State aforesaid, certify that _____ personally appeared before me this day and acknowledged the execution of the foregoing instrument.

WITNESS my hand and official stamp or seal, this _____ day of _____, 20__.
_____, Notary Public My commission expires: _____