

AFFIDAVIT

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 seeking admission in the Wilson County Schools for the following child: _____.
4. I am the parent/legal guardian (**circle one**) of the child.
5. The child is now living with _____, an adult domiciled in Wilson County, North Carolina. His/Her relation to the child is _____. His/her address is _____.
6. The child is qualified to attend school in the Wilson County Schools because (**check all boxes below that apply**):
 - The parent or legal guardian of the child is dead/seriously ill/incarcerated (**circle one**).
 - The parent or legal guardian of the child has abandoned complete control of the child, as evidenced by the failure of the parent or legal guardian to provide substantial financial support and parental guidance to the child.
 - The parent or legal guardian of the child has abused or neglected the child.
 - The physical or mental condition of the parent or legal guardian of the child is such that the parent or legal guardian is unable to provide adequate care and supervision to the child.
 - The parent or legal guardian of the child has relinquished physical custody and control of the child upon the recommendation of the department of social services or the Division of Mental Health.
 - The child's previous home was destroyed or made uninhabitable by natural disaster.
 - The parent or legal guardian is one of the following (**circle one**):
 - a. On active military duty* and is deployed** out of the local school administrative unit in which the student resides (evidence of deployment must be tendered with affidavit);
 - b. A member or veteran of the uniformed services who is severely injured and medically discharged or retired, and it has been one year or less since the medical discharge or retirement of the parent or guardian (evidence of medical discharge or retirement must be tendered with affidavit); or
 - c. A member of the uniformed services who died on active duty or as a result of injuries sustained on active duty and it has been one year or less since the death (evidence of death must be tendered with affidavit).

*Active duty does not include periods of active duty for training for less than 30 days.
**Deployment as defined in G.S. 115C-407.5 (Interstate Compact on Educational Opportunity for Military Children) includes the period one (1) month prior to the service member's departure from home station on military orders through six (6) months after return to home station.
7. The child has/has not (**circle one**) been convicted of a felony in North Carolina or any other state or territory.
8. 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.
9. The child's claim of residency in Wilson County is not primarily related to attendance at a particular school within Wilson County Schools.

10. I have given _____, an adult domiciled in Wilson County, responsibility for making educational decisions for and about the child, including, but not limited to, receiving notice of discipline, attending conferences with school personnel, granting permission for school-related activities, and taking appropriate action in connection with student records.

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 I 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: _____