



## GENERAL ENROLLMENT AFFIDAVIT

Pursuant to Board Policy JBCA, Resident Student and Administrative Regulation JBC-R, Student Admissions, this Affidavit shall be completed during enrollment and/or re-enrollment in Atlanta Public Schools. If the parent/guardian does not own or lease the property in which they reside, the parent/guardian should complete an Affidavit of Residency (DF-003). This affidavit should not be utilized for Homeless students. Please see Board Policy JBC(1) and Administrative Regulation JBC(1)-R, Homeless Students.

\_\_\_\_\_  
Name of Parent/Legal Guardian/Legal Custodian

\_\_\_\_\_  
Name of Student

Address: \_\_\_\_\_ APT #: \_\_\_\_\_

City: \_\_\_\_\_ State: GEORGIA Zip: \_\_\_\_\_

**Residency Notice:** To be enrolled in Atlanta Public Schools, students must reside full-time in the City of Atlanta with their natural parent(s), legal guardian(s), or legal custodian(s). Students and their parent(s)/guardian(s)/custodian(s) must remain full-time City of Atlanta residents for the entire period of enrollment in Atlanta Public Schools. For the purpose of this policy, a resident is defined as an individual who is a full-time occupant of a dwelling located in the City of Atlanta and who, on any given school day, is likely to be at their stated address when not at work or school. A person who owns property in the City of Atlanta, but does not reside in the City of Atlanta, is not considered a resident for the purpose of this policy.

I understand that a student admitted under false information is illegally enrolled and will be dismissed or reassigned from Atlanta Public Schools upon discovery. Further, I understand that a person who knowingly and willfully...makes a false, fictitious, or fraudulent statement or representation; or makes or uses any false writing or document, knowing the same to contain any false, fictitious, or fraudulent statement of entry, in any matter... shall upon conviction thereof, be punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both (O.C.G.A. 16-10- 20). False information may result in the loss of a student's athletic eligibility for one calendar year. I further understand that it is my responsibility as the Parent/Legal Guardian to immediately inform the school district of any changes in the information provided.

### NOTICE OF PENALTIES AND LIABILITIES

I, the parent/legal guardian/custodian, understand that: (Please initial each paragraph)

1. \_\_\_\_\_ If I falsify information or defraud the school system with respect to any information provided in this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. §20-2-133(a).
2. \_\_\_\_\_ If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same.
3. \_\_\_\_\_ I may be prosecuted, held criminally liable, and imprisoned for not less than one, nor more than ten (10) years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. §16-9-1.
4. \_\_\_\_\_ I may be prosecuted, held criminally liable, and imprisoned for not less than one, nor more than five (5) years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. §16-9-2.
5. \_\_\_\_\_ I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one, nor more than five (5) years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. §16-10-20.
6. \_\_\_\_\_ I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one, nor more than five (5) years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. §16-10-71.

I AFFIRM THAT I HAVE READ AND UNDERSTAND EACH OF THE ABOVE PROVISIONS. I SWEAR THAT I AM A FULL-TIME RESIDENT OF THE CITY OF ATLANTA OR I AM AN EMPLOYEE OF ATLANTA PUBLIC SCHOOLS AND AFFIRM THAT THE INFORMATION I HAVE GIVEN IN THIS DOCUMENT IS TRUE AND CORRECT.

\_\_\_\_\_  
Signature of Enrolling Parent/Guardian

Date: \_\_\_\_\_

Sworn to and Subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

DF-002

06-30-08