



**Statement of Objection to Use of
Social Security Number For
Student Identification**

130 Trinity Avenue, S.W.
Atlanta, GA 30303
Phone: 404-802-3500

www.atlantapublicschools.us

I do not wish to provide the Social Security number of my child/children:

Name of first child

Current School Enrolled

Name of second child, if appropriate

Current School Enrolled

Name of third child, if appropriate

Current School Enrolled

Name of fourth child, if appropriate

Current School Enrolled

Name of fifth child, if appropriate

Current School Enrolled

Atlanta Public Schools

Name of School System

Signature of Parent or Guardian

Date