



Residency Affidavit of Parent(s) or Legal Guardian(s)

I, _____, of lawful age, being first duly sworn under oath state that:
Print Full Name

1. I presently and permanently reside at:

2. I am the parent or legal guardian of:

Street Address

Student's Full Name

City, State, Zip

Student's Full Name

County

Student's Full Name

which is my legal residence located in Georgia.

3. My child(ren) and I began residing at the address listed above on ____/____/____.
MM DD YYYY

The name and last known address of the student's parent(s) or legal guardian(s):

Parent(s) or Legal Guardian(s) Name _____

Address _____

Affirmations:

1. I attest that this request to attend Liberty Tech Charter School is not primarily intended to allow my student(s) to attend a particular school that he or she would not otherwise be able to attend because it is outside his or her designated attendance area, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, to utilize special services or programs offered at a particular school, or any other similar reason.
2. I further attest that the student(s) named above (are) not currently under, or currently subject to a recommendation for, a long-term suspension or expulsion from their most recent school.
3. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school.
4. I also understand that the Liberty Tech Charter School Principal or designee may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the student has enrolled at LTCS. The audit may include a personal visit to the student's home at the residence listed in this affidavit by a school district attendance officer or other employee of the school to verify the facts sworn to in this affidavit.

I, _____, understand that if I provide false information or defraud Liberty Tech Charter School on this Affidavit of Residence, I will be required to pay for the costs incurred by the school for the period that the ineligible student is enrolled, as set for in O.C.G.A. 20-2-133.

By executing this affidavit, I solemnly swear or affirm under the penalties listed above that the contents of this affidavit are true and accurate.

Signature of Parent/Legal Guardian

Date

Section for Notary Public

SWORN TO (OR AFFIRMED) AND SUBSCRIBED BEFORE ME ON THIS

_____ day of _____, 201____,

[Notary Seal]

Notary Public

My Commission Expires: