

**State of Georgia
County of Fulton
Langston Hughes High School
Affidavit of Residence***

The undersigned, first being duly sworn, deposes and states that he/she is the parent/guardian of _____, and said student lives with the undersigned, and that both
Student
both student and the undersigned are bona fide full time residents of Fulton County and that they reside at

_____,
Street City Zip Code

Fulton County, Georgia with _____.
Name of homeowner/apartment lessee

The undersigned further agrees that he/she will notify the Fulton County Board of Education if the parent and/or student ever terminate the above residence in Fulton County while the student is enrolled in a Fulton County school. **If it is determined that the student does not live in the appropriate school district, he/she will be withdrawn from school immediately.**

Signature of Parent/Guardian

Signature of Homeowner/Apartment Lessee

Print Name of Parent/Guardian

Print Name of Homeowner/Apartment Lessee

Sworn to and subscribed before this ____ day of _____, 200__.

(Notary Public)

My Commission expires _____

***False swearing is a violation of the laws of the State of Georgia, punishable by a fine of not more than \$1,000, or by imprisonment for not less than one nor more than five years, or both. (O.C.G.A. 16-10-71).**

When using this form you must bring two additional documents from the list below bearing the name of the person who signed above as the owner of the house or lessee of the apartment in order to register.

Acceptable Documentation

- | | |
|----------------------------------------------------|---------------------------------------|
| * Copy of home mortgage payment book | * Current bank statement |
| * Current utility bill (gas, electric, or water) | * Copy of home contract |
| * Apartment lease showing name of the lessee | * Receipt to have utilities connected |
| * Homeowner's/Renter's insurance registration card | * Current paycheck stub |