BOARD CHAIR DeeDee Rasmussen

BOARD VICE CHAIR Georgia "Joy" Bowen



BOARD MEMBERS
Dee Crumpler
Maggie Lewis-Butler
Alva Swafford Striplin

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Student Information

SUPERINTENDENT Rocky Hanna

For Families Residing With a Homeowner or Renter

AFFIDAVIT OF RESIDENCY

Under the penalty of perjury and Florida law governing false statements made to public servants, I certify that the information included in this form is true and correct. *Must complete annually.*

Student's Name	
Explain your current living situation.	
Current address	Previous address
Dates fromto Current owner/la	ndlord/property manager name
Address	Phone Number
(Print parent/Guardian name)	(Parent/Guardian signature)
STATE OF FLORIDA/COUNTY OF LEON	N
SUBSCRIBED and SWORN before me on this, who () is	s day of, 20, by personally known to me or () has produced a Florida Driver's License.
Signature of Notary	Name of Notary typed, printed or stamped
Notary Dublic State of Florida at Large	
Notary Public, State of Florida at Large My Commission Number is	
My Commission expires	

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