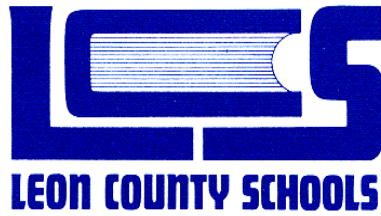


BOARD CHAIR
Georgia "Joy" Bowen
BOARD VICE CHAIR
Alva Swafford Striplin



BOARD MEMBERS
Maggie Lewis-Butler
DeeDee Rasmussen
Rosanne Wood

Page 1 of 2

SUPERINTENDENT
Rocky Hanna

AFFIDAVIT OF RESIDENCY

For families residing with a homeowner or renter

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 from _____ to _____ Current owner/landlord/property manager name _____
Address _____ Phone Number _____

(Print parent/Guardian name) **(Parent/Guardian signature)**

STATE OF FLORIDA/COUNTY OF LEON

SUBSCRIBED and SWORN before me on this day of _____, 20_____, by _____, who () is personally known to me or () has produced a Florida Driver's License.

Signature of Notary **Name of Notary typed, printed or stamped**

Notary Public, State of Florida at Large
My Commission Number is _____
My Commission expires _____

2757 West Pensacola Street • Tallahassee, Florida 32304-2998 • Phone (850) 487-7546 • Fax (850) 487-0444 • www.leonschools.net
"The Leon County School District does not discriminate against any person on the basis of sex (including transgender status, gender nonconforming and gender identity), race, age, color, ethnicity, national origin, religion, pregnancy, marital status, disability, sexual orientation, or genetic information."