

BOARD CHAIR
Alva Swafford Smith

BOARD VICE CHAIR
Rosanne Wood



BOARD MEMBERS
Laurie Lawson Cox
Marcus Nicolas
Darryl Jones

SUPERINTENDENT
Rocky Hanna

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Student Information

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 _____ **Date** _____

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) 561-8980 • Fax (850) 561-8988 • lcsadmissions@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), marital status, sexual orientation, race, religion, ethnicity, national origin, age, color, pregnancy, disability, military status, or genetic information."

Building the Future Together

(1)

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Residential Information

Homeowner's/Renter's Acknowledgement (Household Status)

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.**

Date _____

I _____ acknowledge that _____
(owner/renter) (additional residents)

reside at _____

(Print Homeowner/Property Manager name)

(Homeowner/Property Manager signature)

Owner's Contact Address

Phone number

The Renter's Lease is: circle one
Annual OR Month-to-month

Student/Parent-Guardian: circle one
Annual OR Month-to-month

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