



Carroll County Schools Property Owner's/Renters Affidavit

rev 11/2017

Person completing this form MUST be the actual property owner OR lease holder of the address listed on this form. Owner/Renter MUST provide a copy of their CURRENT photo ID and 2 CURRENT proof of residence items (see reverse for list).

Name of Person Completing this form: _____ OWNER RENTER
Phone Number to reach you: _____ (required)

STATE OF GEORGIA

COUNTY OF CARROLL ***THIS AFFIVADIT IS ONLY VALID FOR THE CURRENT SCHOOL YEAR AND WILL EXPIRE: May 24, 2019***

By signing this affidavit, I attest that I am the owner or renter of the residence located at:

Number street name (Apt, Unit #) City Zip

And that the following adult(s) and his/her school aged child(ren) live at this residence with my permission:

Adult Name: _____ Adult Name: _____

Child(ren): _____

PLEASE READ AND INITIAL EACH OF THE STATEMENTS BELOW:

I attest that there is no WRITTEN lease agreement and that none of the utilities serving the residence are billed to the person named above who resides here. **INITIAL:** _____

I am providing, with this affidavit, a CURRENT residential property tax statement or the purchasing/closing information OR a current lease agreement AND a current utility bill for the residence above. ***I understand that this information will be verified through various sources (contact of Property Tax office, building management, etc).*** **INITIAL:** _____

I am making the affidavit for the purpose of certifying to the Carroll County Board of Education that the student(s) named in this affidavit are currently residing in Carroll County. I understand that this affidavit will be used and relied upon by the Carroll County School System in determining whether the student(s) are eligible for enrollment in the Carroll County School System. **INITIAL:** _____

To my knowledge, the residence has not been established solely for the purpose of allowing the student(s) to enroll in Carroll County Schools. ***I voluntarily consent to allow an employee or representative of the Carroll County School System to visit my property from time to time to verify the information contained in this affidavit.*** **INITIAL:** _____

I understand that I must notify either the current school and/or the Carroll County Board of Education, when the above named adults and child(ren) move from my residence. INITIAL: _____

I understand that any false statement in this affidavit may subject me to prosecution under the criminal laws of the State of Georgia and may subject me to fines or imprisonment as set forth in those criminal laws. **INITIAL:** _____

I solemnly swear or affirm under the penalties listed above that the contents of this affidavit and the information provided on the enrollment form are true to the best of my knowledge, information and belief. By signing below, I indicate that I have read and understand this affidavit.

Property Owners/Renters Signature Date

Signed, sealed and delivered on this the ____ day of _____, 20____, before the undersigned officer, duly authorized to administer oaths:

My Commission Expires: _____ Notary Public Original Official (seal)