

EDUCATIONAL RESIDENCY AFFIDAVIT – RESIDENTIAL ADULT

Students residing with an adult who is a domiciliary of Wilkes County as a result one or more of the conditions listed below may use this form to validate the enrollment of these students.

- The death, serious illness, or incarceration of the parent/guardian
- The abandonment by the parent/guardian or the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
- Abuse or neglect by the parent/legal guardian, as substantiated by DSS or similar agency.
- The physical or mental condition of the parent/legal guardian is such that he/she cannot provide adequate care and supervision of the student, or
- The loss or un-inhabitability of the student's home as a result of a natural disaster.
- The parent/guardian is: 1) on active military duty and is deployed out of the local administrative unit. The term "active duty" does not include periods of active duty for training for less than 30 days; 2) A member or veteran of the uniformed services who is severely injured and medically discharged or retired, but only for a period of one year after the medical discharge or retirement of the parent or guardian; 3) A member of the uniformed services who died on active duty or as a result of injuries sustained on active duty, but only for a period of one year after death. The term "active duty" is as defined in G.S. 115C-407.5. Assignment is only available if some evidence of the deployment, medical discharge, retirement, or death is tendered with the affidavit.

(G.S.115C-366)



STUDENT INFORMATION

Student's Legal Last Name

Student's Legal First Name

Student's Legal Middle Name

RESIDENTIAL ADULT EDUCATIONAL RESIDENCY AFFIDAVIT

- My name is _____
 I am am not (check one) over eighteen years of age.
 I live at _____
 I have lived there _____ (days, months, years)
 I lived at _____ before moving to my present address.
 I get my mail at _____
 I am registered to vote in _____ County, _____ (State)
 My motor vehicle is registered in _____ County, _____ (State)
 My telephone number is _____ (Home) _____ (Work)
 I work at _____ (Name of Business/Location)
- The child, _____, lives with me and has lived with me since _____. The child's relation to me is _____.
- The child is now living with me and is qualified to attend school in Wilkes County, North Carolina because (check boxes for all statements which are true):
 - The mother of the child is: dead seriously ill incarcerated (check one)
 - The father of the child is: dead seriously ill incarcerated (check one)
 - Both the parents or legal guardians or legal custodians of the child have abandoned complete control of the child, as shown by the parent or legal guardian's failure to provide substantial financial support and parental guidance to the child.
 - The parents or legal guardians or legal custodians of the child have abused or neglected the child.
 - The child has been found to be abused or neglected by the court in _____ County, _____ (State).
 - The parents or legal guardians or legal custodians of the child are unable to provide adequate care and supervision to the child because of the parents' or legal guardian's physical or mental condition, which is _____.
 - The child's previous home located at _____ was destroyed or made uninhabitable by natural disaster on or about _____ (date).
 - The child's parent/guardian is:
 - on active military duty for more than 30 days and is deployed out of the local administrative unit;
 - a member or veteran of the uniformed services who is severely injured and medically discharged or retired for less than one year;
 - a member of the uniformed services who died on active duty or as a result of injuries sustained on active duty within the past year.

4. The child is not now under a term of suspension or expulsion from any school for conduct that could have led to a suspension or expulsion from the Wilkes County Schools.
5. The child's claim of residency is not primarily related to attendance at a particular school within the Wilkes County School system.
6. The child's claim of residency is not primarily related to attendance at a particular school in order to play any sport.
7. I have been given and accept responsibility for making education decisions for and about the child, including receiving notice of discipline, attending conferences with school personnel, granting permission for school-related activities, and taking appropriate action in connection with student records. I have also been given and accept responsibility for consenting to medical treatment for the child.
8. Check boxes for all the following statements that are true:
 - A copy of a power of attorney executed by the parents/legal custodians is is not (check one) attached.
 - The parents, guardians, or legal custodians of the child have not signed a document granting me the authority described in paragraph 7 and have not signed the separate affidavit required by North Carolina General Statutes Section 115C-366(a3) because they are (check applicable box):
 - All dead.
 - Unable to do so because _____.
 - Refuse to do so.
 - Otherwise unable to do so because _____.
 - Even though the parents or guardians are legal custodians of the child have not signed a document granting me the authority described in #7, I hereby accept and assume such responsibility and authority and agree to defend and hold harmless the Wilkes County Board of Education of and from all claims, suits, proceedings, penalties, and damages based on a lack of such authority.
9. I understand that if the information in this affidavit is false, the child may be removed from school. The Wilkes County Schools will give notice of an opportunity to appeal the removal in accordance with Board of Education policy.

I UNDERSTAND THAT IF I HAVE PROVIDED FALSE INFORMATION IN THIS AFFIDAVIT, I MAY BE GUILTY OF A CLASS 1 MISDEMEANOR AND WILL HAVE TO PAY THE WILKES COUNTY SCHOOLS AN AMOUNT EQUAL TO THE COST OF EDUCATING THE CHILD DURING THIS TIME HE OR SHE WAS ENROLLED IN THE WILKES COUNTY SCHOOLS.

Signature/Adult Domiciliary of Wilkes County (SEAL)

TO BE COMPLETED BY A NOTARY PUBLIC

STATE OF _____ COUNTY OF _____

I, _____, a Notary Public for said County and State, do hereby certify that _____ appeared before me and acknowledged the due execution of the foregoing instrument.

Witnessed by my hand and seal this _____ day of _____, 20_____.

Signature of Notary _____ My Commission Expires _____