State of Georgia Affidavit of Residence

The undersigned, first being duly sworn, de	eposes and states that	t he/she is the parent/guardian of
	, and said	student lives with the undersigned and that
Student	:1	
both the student and the undersigned are	residents of Coweta	a County, Meriwether County or Spalding
County, Georgia and that they reside at		
Street	City	Zip Code
with		
Name o	of Parent/Guardian	
student ever terminate the above residence is the student in the Coweta Charter Academ	in Coweta County, M ny at Senoia. If it is o	narter Academy at Senoia if the parent and/or deriwether County, or Spalding County while determined that the student does not live in orgia, he/she will be withdrawn from school
Signature of Parent/Guardian	Signa	ature of Homeowner/Apartment Lessee
Print Name of Parent/Guardian	— Print	Name of Homeowner/Apartment Lessee
Sworn to and subscribed before this	_day of	
	(Notary Publi	ic) My Commission expires
*False swearing is a violation of the laws of the imprisonment for not less than one nor more th	- · ·	
Accept	table Documentation	
* Copy of home mortgage payment book * Current utility bill (gas, electric, or water) * Apartment lease showing name of the lesse * Homeowner's/Renter's insurance		 * Current bank statement * Copy of home contract * Receipt to have utilities connected * Current paycheck stub

Grade: _____ School Name: Coweta Charter Academy at Senoia