## AFFIDAVIT OF BIRTH

I,	, do swear or affirm that I am the					
		_ of				
father, mo	other or guardian		studen	t		
and that said child	d was born on:					
month	day ye	ar				
I am unable to fu	urnish a <u>certified</u> copy of	the student's	birth certifica	ate at this tim	e for the	following
reasons:						
In lieu of the requi	ired certified birth certificat	e, I am provid	ng the follow	ing acceptable	e items:	
	noncertified birth certificate					
	baptismal record					
	court record					
	doctor or hospital record					
	sworn Government F identification cards etc.	Records, i.e.	passport,	immigration	papers,	refugee
	certified citizenship pape	er				
	other (Must be approved by the Coordinator of Student Services)					

In the absence of any documents that may be supported by this affidavit, I understand that failure to produce an official birth certificate within thirty (30) days will lead to a referral to the local law enforcement agency for investigation.

Signature of Parent/Guardian

Date