

FAIRFAX COUNTY PUBLIC SCHOOLS
STUDENT REGISTRATION

LEASEHOLDER OR HOMEOWNER AFFIDAVIT

I hereby affirm or swear that the adults listed below and their children live in my residence at the following address:

_____	_____
Number, Street	Apt. Number
_____	_____
City	State
_____	ZIP Code

(Property deed or lease agreement **must** accompany this affidavit.)

Name of Parent or Guardian: _____

Name of Students: _____

I understand that enrollment of the students named above is based on my statement and that if this statement is false I may be liable for payment of tuition for the students. I also agree to notify the school principal of any change in the residency of the above named students within three days of such change.

Printed Name of the Homeowner or Leaseholder

Phone Number

Signature

Date

Subscribed and sworn before me this _____ day of _____, 20_____.

State: _____ County: _____. My commission expires on _____.

Witness my hand in official seal.

Notary Public