

STATE OF NORTH CAROLINA – GATES COUNTY SCHOOLS

RE: \_\_\_\_\_  
(Student's Name)

AFFIDAVIT OF RESIDENCY

I state under oath that the following facts are true and correct:

1. My name is \_\_\_\_\_
2. My street address is \_\_\_\_\_  
My mailing address is \_\_\_\_\_  
My telephone number is \_\_\_\_\_ (home) \_\_\_\_\_ (work)
3. I certify that the following persons are residing full time at the address listed below:

\_\_\_\_\_  
Name(s) of Parent(s) or Guardian

\_\_\_\_\_  
Student(s) Name(s)

\_\_\_\_\_  
Street Address

4. As Owner/Leaser, I agree to provide one of the following items in my name to prove domicile for the property address above: mortgage document; lease or rental agreement; an electric, telephone, gas or water bill.
5. **If it is found that a person willfully and knowingly provided false information in the affidavit, the maker of the affidavit will be guilty of a Class 1 misdemeanor.**

\_\_\_\_\_  
(Owner's/Leaser's Signature)

**THIS FORM MUST BE SIGNED IN FRONT OF A NOTARY**

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
(Notary Public)

My commission expires: \_\_\_\_\_