

Caldwell County Schools Student Support Services	Ref. BP 3100 State and Local Practice	A-3540-A
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**AFFIDAVIT FOR ENROLLMENT OF NON-DOMICILIARY STUDENT
Caldwell County Schools**

DATE: _____

REGARDING: _____ (the non-domiciliary student)

I, _____, affirm that I am the:

(Please initial beside the applicable phrase)

- _____ Adult person with whom the non-domiciliary student resides in Caldwell County;
- _____ Mother of the non-domiciliary student;
- _____ Father of the non-domiciliary student;
- _____ Guardian or legal custodian of the non-domiciliary student.

I attest that the non-domiciliary student resides in Caldwell County with _____, an adult person who is domiciled in Caldwell County, as a result of:

(Please initial beside the applicable circumstance)

- _____ The death, serious illness, or incarceration of a parent or legal guardian of the non-domiciliary student.
- _____ The abandonment of the non-domiciliary student by a parent or legal guardian, of 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 or legal guardian;
- _____ The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the non-domiciliary student;
- _____ The relinquishment of physical custody and control of the student by the student's parent or legal guardian upon the recommendation of the department of social services or the Division of Mental Health, or
- _____ The loss or uninhabitability of the non-domiciliary student's home as the result of a natural disaster.

I affirm that the non-domiciliary student is not currently under a term of suspension or expulsion from a school for conduct that could have led to a suspension or an expulsion from the Caldwell County Schools had the student been enrolled there at the time of such conduct.

I affirm that the student's claim of residency in Caldwell County is not primarily related to attendance at a particular school within the Caldwell County School System.

I affirm that the adult caregiver with whom the non-domiciliary student is residing in Caldwell County has been given and accepts responsibility for all educational decisions required by the school concerning the student's academic course of study, extracurricular activities, and conduct. These decisions or actions include enrolling the student, receiving and responding to notices of discipline under G. S. 115C-391, attending conferences with school personnel, granting permission for school-related activities, granting permission for emergency medical care, receiving and taking appropriate action in connection with student records, and any other decisions or actions recommended or required by the school. The adult caregiver with whom the child resides has the same legal authority and responsibility regarding the student as a parent or legal custodian would have even if the parent, guardian, or legal custodian does not sign the affidavit.

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I understand that if it is found that a person willfully and knowingly provided false information in this affidavit, the maker of this affidavit shall be guilty of a class one misdemeanor and shall pay to the Caldwell County Board of Education an amount equal to the cost of educating the student with local funds during the period of enrollment.

***Please initial the following statement if the student's parent, guardian, or legal custodian is unable to sign, refuses to sign, or is otherwise unavailable to sign a supporting affidavit.

_____ As the adult caregiver with whom the non-domiciliary student resides in Caldwell County, I attest that the student's parent is unable, refuses, or is otherwise unavailable to sign this affidavit.

Except in the circumstance immediately above, to enroll a student one form must be completed by the child's parent/guardian/custodian and another by the adult person taking responsibility for the child.

(Signature)

(Print Or Type Name)

(Address)

(Phone Number)

Sworn to and subscribed before me this _____ day of _____, 200_____.

Notary Public

My Commission Expires _____

Approved by the Superintendent: July 21, 1997
Revised: January 31, 2003
Revised: July 2008