

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF PICKENS )

## AFFIDAVIT OF RESIDENCE

### TO BE COMPLETED BY STUDENT'S PARENT/GUARDIAN:

1. My name is \_\_\_\_\_.  
I am the parent/legal guardian of \_\_\_\_\_  
Age \_\_\_\_ Grade \_\_\_\_ School \_\_\_\_\_  
We live at the following (911) address in Pickens County:  
\_\_\_\_\_  
Home Telephone Number: \_\_\_\_\_ Work Number: \_\_\_\_\_
2. At the present time, I am unable to produce proof of residence because we are currently living in the residence of \_\_\_\_\_.
3. I certify that the address indicated is our primary and permanent address at the present time, and that we do not live at any other address. I further certify that I do not pay for utilities at any other address.
4. If at any time I move to another address, I will immediately furnish the school where my child is enrolled with my change of address and my child will attend the school serving my new residence unless student assignment has been requested and approved.
5. I understand that I will have to pay tuition to the School District of Pickens County if I (parent/legal guardian) am not a resident of Pickens County.

### TO BE COMPLETED BY PERSON VERIFYING RESIDENCE:

My name is \_\_\_\_\_. I hereby verify that the above-named individuals live at my residence. I am providing proof of residence herewith. I understand that if they move, I am to notify the school where the student is enrolled to void this affidavit and that if I do not notify the school, penalties could apply.

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**We, the undersigned, hereby state and affirm** that we know and understand that pursuant to Section 16-9-30 of the *South Carolina Code of Laws*, it is unlawful to willfully and knowingly swear falsely in taking any oath required by law that is administered by a person directed or permitted by law to administer such oath. We further understand that violation of the above-specified section of law constitutes a felony and persons committing such violation may be fined in the discretion of the Court or imprisoned not more than five years, or both.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Signature of Person Verifying Residence

Sworn and subscribed before me this  
\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
(Notary Public for South Carolina)

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