

Fact Affidavit Form for School

State of: _____

County of: _____

Affiant Information

I, **Full Name:** _____, residing at **Address:**

_____, **City:** _____,

State: _____, being of legal age and sound mind, do

hereby declare the following facts under oath:

Affidavit Purpose

This affidavit is submitted for matters related to the school record/documentation of:

Student Name: _____

Date of Birth: _____

School Name: _____

Statement of Facts

1. _____
2. _____
3. _____

Supporting Information

Birth Certificate

Proof of Residency

Parent/Guardian Identification

Other: _____

Acknowledgment

I affirm that the information provided above is accurate to the best of my knowledge and belief.

Signature of Affiant: _____

Date: _____

Notary Section

State of: _____

County of: _____

Sworn to and subscribed before me this ____ day of _____, 20.

Notary Public Signature: _____

Notary Seal/Stamp: _____