

**2018-2019**

Friendswood Independent School District

**GRANDPARENT'S After-School Care Affidavit for Non-Resident Student**

(TO BE COMPLETED BY THE PARENT/GUARDIAN and the GRANDPARENT/RESIDENT)

**One Student per Affidavit**

Name of Student:	Last	First	Middle	Age	Grade Level	Campus Based on Parent's Residence	Campus Based on Grandparent's Residence
Name of Parent:	Last	First	Home Address:		City	State	Zip
Primary Phone No:				Alternate Phone No:			
Name of Grandparent:	Last	First	Middle	Primary Phone No:		Alternate Phone No:	
Address of Grandparent:	Street			City	State	Zip	

As the parent/guardian of the above-named child, I am requesting admission to the campus designated above under *Texas Education Code 25.001(b)(9)*. My child's grandparent, as named above, personally provides a substantial amount of after-school child care as specified below:

Actual hours per day: _____ to _____ AM and/or _____ to _____ PM	Number of school days per week:	Number of months per school year
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I agree to notify the school within three days of any changes to the after-school care described above. I also understand that this document must be completed prior to the beginning of each school year to verify that the after-school care is still being provided. I understand my student's failure to abide by all communicated laws, rules and policies in the Student Code of Conduct, Student handbook or any specific campus rules and regulation, shall cause the principal or designee to take disciplinary action as specific in the Code and Handbook and the request for enrollment may be revoked.

The following SEVEN documents must be submitted along with this statement to the FISD Administration building for approval and at the time of enrollment to verify the residency:

1. Parent's Government Issued Photo Id
2. Parent's Current Utility Bill (gas, water, electric)
3. Student Birth Certificate or other acceptable proof of identity
4. Grandparent's Government Issued Photo Id
5. Grandparent's Current Utility Bill (gas, water, electric)
6. Grandparent's Current Lease, Mortgage GCAD Statement or Deed

**FALSIFICATION OF INFORMATION ACKNOWLEDGEMENT**

I declare that I have provided no false information to the Friendswood Independent School District (FISD) regarding my family's residency. I understand that falsifying this sworn affidavit is a **criminal offense (Perjury)** under Section 37.01 of the Texas Penal Code, which is a Class A misdemeanor punishable up to one (1) year of confinement in jail; a fine not to exceed \$2,000.00; or both such fine and imprisonment. Another criminal offense for falsifying this residency information is a violation of Texas Penal Code 37.10: **Tampering with a Government record.**

I understand that this child will be administratively withdrawn from FISD if it is determined that I have enrolled the child based on false information. **I also understand that FISD utilizes the Galveston County Constables Office to verify residency. A random check to the physical Friendswood address may occur. I agree to cooperate fully with the officer or an officer of the school district verifying residency.**

**PARENT/Guardian's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**STATE OF** \_\_\_\_\_ **§** **COUNTY OF** \_\_\_\_\_ **§**

**BEFORE ME, the undersigned authority, on this day personally appeared** \_\_\_\_\_ **known to me to be the person whose named is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and considerations therein expressed.**

**GIVEN under my hand and seal of office on this** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_.

**GRANDPARENT/Resident's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**STATE OF** \_\_\_\_\_ **§** **COUNTY OF** \_\_\_\_\_ **§**

**BEFORE ME, the undersigned authority, on this day personally appeared** \_\_\_\_\_ **known to me to be the person whose named is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purpose and considerations therein expressed.**

**GIVEN under my hand and seal of office on this** \_\_\_\_\_ **day of** \_\_\_\_\_, **20** \_\_\_\_\_.

\_\_\_\_\_  
Notary Signature

(Affix Notary Seal)

FOR OFFICE USE ONLY		
Parent's Govt Issued Photo ID Parent's Current Utility Bill Grandparent's Govt Issued Photo ID Grandparent's Current Utility Bill Grandparent's Current Lease/Mortgage Birth Certificate	After-school Child Care Meets Definition of Substantial Amount  <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature of Administrator _____ Date _____