NOTE: If the student's parent or legal guardian has retained legal custody

of this student, then the affidavit procedures for parents/legal guardians and adult caregivers (Affidavits B and C) must be followed in lieu of this document. If the affidavit requirements cannot be met then the student will be considered as an out-of- district

AFFIDAVIT D

STATE OF NORTH CAROLINA) COUNTY OF HENDERSON)

Please Print or Type

transfer.

IN THE MATTER OF					STATEMENT OF AUTHORITY AND RESPONSIBILITY BY LEGAL CUSTODIAN AND BY RESPONSIBLE ADULT	
Full Name of Student						
Address of Group Home, Foster Home, or Facility						
City			State	Zip	(LICENSED GROUP HOME, FOSTER HOME, OR SIMILAR FACILITY)	
Current	Grade	Last School	Attended		(G.S. 115C-366(a6))	
Sex	Date of Birth		Age	Printed	Printed Name of Responsible Adult	
We here	by certif	y and represer	nt that the abo	ove-referenc	ed student has been placed with	
		(Name	e of group ho	me, foster he	ome, or similar facility)	
by		(Name	e of individua	l or governr	nent agency)	
	The individual or government agency listed above who has placed this student with the above-referenced group home, foster home or similar facility has been awarded legal custody of the student by a court (attach court order).					

- 2. The group home / foster home / facility has been approved as a "licensed facility" by the State of North Carolina.
- 3. The undersigned responsible adult resides or is employed within the boundaries of the Henderson County School District.
- 4. The undersigned responsible adult has the authority and hereby accepts the responsibility for educational decisions for the student, including enrolling the student, receiving and responding to notices of discipline under G.S. 115C-391, attending conferences with school personnel, acting as "parent" in connection with all special education decisions, 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 in connection with this student.
- 5. Student is not currently under suspension or expulsion from attendance at a private or public school in this or any other state and has never been convicted of a felony in this or any other state.

6. If <u>any</u> of the above circumstances/information changes the undersigned individuals agree to notify the school principal immediately.

Sworn Under Oath or Affirmation.

	Signature of Responsible Adult			
Ado •	dress and Phone Numbers for Responsible Adult: Mailing Address:			
•	Phone numbers: Daytime Evening Cell			
SWORN TO AND SUBSCRIBED This day of				
by(Name of Responsible Adult)				
(Signature of Notary Public)				
My Commission Expires:	(Notary Seal)			
	Sworn Under Oath or Affirmation.			
	(Signature of Individual or Government Agency Rep.)			
SWORN TO AND SUBSCRIBED This day of				
By(Name of Individual or Agency	Representative)			
on behalf of(Name of Government	t Agency)			
(Signature of Notary Public)				
My Commission Expires:	(Notary Seal)			