
Affidavit of Loss School ID

STATE OF [Your State]

COUNTY OF [Your County]

I, [Your Full Name], of legal age, with residence at [Your Full Address], after being duly sworn in accordance with law, hereby depose and state:

1. I am a currently enrolled student at [Name of School], located at [School Address], and was issued an Identification Card (ID) bearing the number [Your School ID Number].
2. That on or about [Date of Loss], I discovered that my said School Identification Card was missing and despite diligent search and efforts to locate the same, said ID could not be found and is now considered lost.
3. That I have not mortgaged, pledged, sold, or in any manner disposed of the said ID to any person or entity.
4. That I am executing this Affidavit to attest to the truth of the foregoing facts and to request the issuance of a replacement for my lost School Identification Card from [Name of School], for identification and record purposes.
5. That I hereby undertake to surrender the said lost Identification Card to [Name of School] immediately, should the same be found or recovered in the future.

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of [Month], [Year], at [City/County], [State].

[Your Signature]

[Your Printed Name]

Subscribed and sworn to before me this ____ day of [Month], [Year], at [Location], by [Your Full Name] who is personally known to me or who has presented [Type of Identification] as identification.

Notary Public:

[Signature of Notary Public]

[Printed Name of Notary Public]

Commission Number: [Commission Number]

My Commission Expires: [Expiration Date]

[SEAL]

Notary Public for the State of [Your State]

County of [Your County]