

Return completed form to Campus

Sworn Statement for Parents/Guardians Renewal Verification Affidavit

Parent / Guardians who have completed a Residency Affidavit, Power-of-Attorney, or Grandparent Affidavit are required to renew at the start of the Fall semester. **This Renewal Verification Affidavit confirms that the information submitted in the previous school year or semester have not changed. If any of the information has changed, a new Affidavit must be completed and returned to school.** An acknowledgment declaring that **no false information** has been provided to MISD concerning current residency status is also required. For each student, please complete and return to the student's campus along with a current utility bill.

☐ **Fall Semester** – Residency Affidavit, Power of Attorney, & Grand Parent Affidavit.

Parent/Guardian Name: _____

Address: _____
Street address City Zip

Primary Telephone: _____ Alternate Telephone: _____

Parent/Guardian email address: _____

Name of student	Age	Grade	School Attending
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FALSIFICATION OF INFORMATION ACKNOWLEDGEMENT

I declare that I have provided no false information to the Mullin Independent School District (MISD) regarding my family 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. 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I understand that my child will be withdrawn from MISD if I have falsely enrolled my child. I also understand that MISD reserves the right to investigate claims of residence under MISD administrative guidelines.

Parent/Guardian's signature _____ Date _____

STATE OF TEXAS §
COUNTY OF _____ §

BEFORE ME, the undersigned authority, on this day personally appeared

_____, known to me by _____
(Parent / Guardian) (DL / ID, Passport, etc.)

to be the person whose name is subscribed to the foregoing instrument and acknowledged
to me that he/she executed that same for the purposes therein expressed.

GIVEN UNDER MY HAND, and seal of this office this _____ day of _____, 20____A.D.

Notary Public, State of: _____

My Commission Expires _____

{SEAL}