



444 Western Boulevard
Jacksonville, North Carolina 28546-6816
Phone (910) 455-1221

School Year 2009-2010

Student Name: _____ SS#: _____

Please write neatly or type your statement (if you need more room, continue on back of form):

Signature (Student/Spouse/Parent): _____
(Circle one) (You must sign this form in the presence of a notary.)

WARNING: IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION, YOU MAY BE FINED, SENTENCED TO JAIL, OR BOTH.

County: _____

NOTARY SEAL

State: _____

My commission expires: _____

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

Notary Signature: _____

Please Print Notary Name: _____