PLATTE COUNTY R-3 SCHOOL DISTRICT AFFIDAVIT OF IN DISTRICT RESIDENCY

l,	, am residing at, (Address)		
(Parent's/Legal Guardian's Name)			(Address)
in the Platte County R-3 School District.			
The child/children I am enrolling in the Platte	County R-3 School Distr	ct are as follows:	
Child's Name	DOB	Grade	School Enrolling
I have provided accurate and truthful information knowingly withheld, concealed, or misrepress of the above child/children to attend the Plate Further, I understand that persons making a school residency requirements may be subjectionally by the contract of the provided with a misdemeat district may vigorously investigate and prosess.	ented any information that te County R-3 School Distalse affidavit or false detect to prosecution for the conor and, upon conviction,	t would have a materict. claration of residence of submitting	terial bearing upon the eligibility by or any other false material to g false residency information.
Finally, I acknowledge that, if investigation rewithdrawn from the Platte County R-3 School			
I am at least eighteen (18) years of age and correct based upon my personal knowledge		made herein are m	nade under oath and are true and
	Signature of Paren	t/Legal Guardian	Date