

NOTARY PUBLIC FOR SOUTH CAROLINA

2025-2026 SHARED HOUSING NOTARIZED AFFIDAVIT

PURPOSE: This form is to be completed by the parent/legal guardian when a family is residing in a shared housing situation due to the loss of housing, economic hardship, or a similar reason. Shared housing is not for the purpose of attending Florence School District Five (FSD5).

REQUIRED: TWO PROOFS OF RESIDENCE with this form (Current utility bill, current driver's license or DMV ID card, copy of rental agreement on letterhead, or notarized statement from property owner) Both must include name and street address of the homeowner/renter where the family is residing.

(Street	t Address)	(Unit/Lot)	(City)		(Zip Code)
Daron	t(s) or Legal Guardian				
	reside with the student at	the address above)	_		
	() (6)				
vame	(s) of Students		Grade Level	School	Date of Birth
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٠	understand, <u>as parent/l</u>	<u>egal guardian,</u> that th	ne above-named stude	ent(s) will be p	ermitted to attend
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My Commission Expires