

Oak Park School District

Office of Student Services

13900 Granzon St. | Oak Park, MI 48237 | Office: (248) 336-7708 | Fax: (248) 336-7731

AFFIDAVIT IN SUPPORT OF APPLICATION FOR ENROLLMENT FOR STUDENTS WITHOUT BIRTH CERTIFICATES

Complete one form per child.

Parent/Legal Guardian's Name: _____
being duly sworn deposes and states that he/she will obtain and provide the Office of Student Services (Registration/Enrollment) within 30 days of this date a certified copy of the birth certificate(s) for the child named on this form.

STUDENT INFORMATION:

- Clearly print the student's first, middle, and last names as it appear on his/her birth certificate, as well as any suffix (i.e. Jr. or II). If the student's name is hyphenated, please include both names (example: Jane Doe Smith-Wilson or John Doe Smith Jr.).

First Name: _____

Middle Name: _____

Last Name: _____ Suffix (i.e. Jr. or II): _____

Date of Birth: _____

City/State of Birth: _____

Parent/Legal Guardian's Name: _____

Relationship to Child: _____

Parent/Legal Guardian's Signature

Date

Witnessed by (School Official)

Date

All completed 30-Day Affidavits must be attached (uploaded) to your pre-enrollment online application.



Oak Park Schools

IS AN EQUAL OPPORTUNITY EMPLOYER.