

AFFIDAVIT OF INABILITY TO PROVIDE
BIRTH CERTIFICATE
2021-2022 School Year

State: Arizona School District: Valor Preparatory Academy of Arizona
To-wit: _____, being first duly sworn upon oath, based upon his/her personal
(Parent/Guardian/Caregiver)

knowledge, answers the following questions as noted in his/her handwriting on this and the attached page, which are propounded by duly authorized officials of the Valor Preparatory Academy of Arizona concerning a student's missing enrollment
(School District)

documentation for the following:

Birth Certificate

In accordance with the Arizona Revised Statute 15-828 - Birth certificate; school records; exception: (link below)

<http://www.azleg.state.az.us/ars/15/00828.htm>

1. What is your legal name? _____
2. What is the full name of the student you wish to enroll in this district? _____
3. What is the age, date, and place of birth of the student being enrolled in this district?
Age: _____
Date of Birth: _____
Place of Birth (city, state, country): _____
4. Who are the parents, parents by legal adoption, legal guardians, or person(s) having legal custody of the student being enrolled?

5. Where is the student currently residing? Provide complete address (Street address with apartment or house number, city, state, zip code)

6. Why are you unable to present a certified copy of the birth records of the enrolling student?

7. What documentary (written) proof can be or is offered of the pupil's identity and age, attach same hereto?

I declare under penalty of perjury, that the foregoing is a true and correct statement. I understand that if I was unable to provide a Birth Certificate or other reliable proof of my child's identity and age upon their enrollment, I have 30 days to comply as allowed by the Arizona Department of Education. I agree to submit said documentation within 30 days of my pupil's enrollment, and understand that failure to comply will lead to Valor Academy of Arizona withdrawing the pupil from the school and referring this case to the local law enforcement agency for investigation.

Adult Student or Parent/Guardian/Caregiver - Signature

Date Signed

Adult Student or Parent/Guardian/Caregiver – Printed Legal Name