



The Office of Student Enrollment
EDUCATIONAL GUARDIANSHIP APPLICATION

Orange County Public Schools

Please list each child individually

Please print clearly

1.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
2.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
3.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
4.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
5.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
6.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First
7.Student: _____ Date of Birth: _____ Grade: _____ [] Male [] Female
Last First

Guardian

E-mail: _____

Guardian Name: _____ Phone Number: _____

Guardian Address: _____
Street City State Zip

Guardian Name: _____ Phone Number: _____

Guardian Address: _____
Street City State Zip

Relationship of Guardian to Student: _____

Reason for Guardianship: _____

Parent with Custody

E-mail: _____

Name of Parent with Custody: _____ Phone Number: _____

Address of Parent with Custody: _____
Street City State Zip

REQUIREMENTS TO OBTAIN EDUCATIONAL GUARDIANSHIP FROM STUDENT ENROLLMENT

<p>Parent lives in <u>Orange, Brevard, Lake, Osceola, Polk, Seminole, or Volusia County</u></p>	<p>Parent lives outside <u>the State of Florida or outside Orange, Brevard, Lake, Osceola, Polk, Seminole, or Volusia County</u></p>
<p><u>Documents needed:</u></p> <ol style="list-style-type: none"> 1. Parent is incarcerated <ul style="list-style-type: none"> • Proof of imprisonment • Notarized statement from custodial parent. 2. Parent is deceased <ul style="list-style-type: none"> • Copy of the obituary or death certificate. 3. Parent is hospitalized <ul style="list-style-type: none"> • Documents stating when the parent was admitted and possible release date. • Notarized statement from custodial parent. 4. Parent is deployed. <ul style="list-style-type: none"> • Military deployment orders • Notarized statement from custodial parent. 	<p><u>Documents needed:</u></p> <ol style="list-style-type: none"> 1. Proof of parents address outside of the seven counties listed above or the state of Florida. 2. Notarized statement from custodial parent assigning individual as the educational guardian.
<p><u>You must also provide:</u></p> <ol style="list-style-type: none"> 1. The student’s birth certificate. 2. Guardian photo ID (Guardian must be present to receive guardianship). 3. Guardian’s proof of residence in Orange County. 	
<p>*In some instances additional documentation may be requested.*</p>	

Attached are the following documents

__ Guardian’s Driver’s License # _____
 __ Guardian’s State ID # _____
 __ Guardian’s Passport # _____

__ Parent’s Driver’s License # _____
 __ Parent’s State ID # _____
 __ Parent’s Passport # _____

__ Notarized Statement from custodial parent
 __ Student’s Birth Certificate
 __ Proof of Parent’s residency outside of the seven counties listed above or the state of Florida
 __ Proof of imprisonment
 __ Obituary or death certificate
 __ Hospitalization documentation
 __ Military deployment order
 __ Other _____

READ AND SIGN

Florida Statutes 837.06 Provides That Whoever Knowingly Makes A False Statement In Writing With The Intent To Mislead A Public Servant In The Performance Of His Official Duty Shall Be Guilty Of A Misdemeanor Of The Second Degree And Punishable By Up To 60 Days In Jail And/Or A Fine Of Up To \$500.00. If You Falsify Your Residence When Enrolling Your Child, You Will Be Referred To Law Enforcement For Prosecution.

Proof of residence must be provided at school.

- If a family either:**
- 1. Provides false information on any OCPS form,**
 - 2. Uses false documentation, or**
 - 3. Does not notify the school of an address change to a different school zone,**

the student will forfeit athletic and extracurricular eligibility for one (1) calendar year from the date of discovery of the violation.

Today's Date _____

Guardian 1 Signature _____

Guardian 2 Signature _____

STATE OF _____

COUNTY OF _____

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

By _____, and DL/ID# _____

By _____, and DL/ID# _____

By _____, and DL/ID# _____

being duly sworn, or having duly affirmed to tell the truth, stated personally before me that they are competent under the law to give this affidavit and unless stated have personal knowledge of the facts stated herein:

Notary Public

Commission Expires: _____