** Form JBC-1

**K-1 OUT-OF-STATE/OUT-OF-COUNTRY VERIFICATION**

|  |  |
| --- | --- |
| **School:** |  |

**This form must be fully completed.**

**Please Print or Type**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Student’s Name: |  |  | Birth Date: |  | / | / |

|  |  |
| --- | --- |
| Address: |  |

Number Street City Zip Code

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Home Phone: |  |  | Parent Work Phone: |  |

|  |  |
| --- | --- |
| Previous School Name: |  |

|  |  |
| --- | --- |
| Previous School Address: |  |

Number Street City State Zip Code

|  |  |
| --- | --- |
| Previous School Phone: |  |

Pursuant to Georgia law, Code Section 20-2-150(b) of the Official Code of Georgia Annotated, the following must be adhered to if an exception is made to the September 1 deadline for entry into the kindergarten or first year program of Cobb County Public Schools. "A child who was a legal resident of one or more other states or countries for a period of two years immediately prior to moving to this state and who was legally enrolled in a public kindergarten or first grade, or a kindergarten or first grade accredited by a state or regional association, or the equivalent thereof, shall be eligible for enrollment in the appropriate general or special education programs authorized in this part if such child will attain the age of five for kindergarten or six for first grade by December 31 of the fiscal year and is otherwise qualified.”

Please list below the previous residence of your child for the past two years. Verification of previous addresses may be required.

|  |  |  |
| --- | --- | --- |
|  |  |  |

Address City/State List Dates

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| --- | --- | --- |
|  |  |  |

Address City/State List Dates

|  |  |  |
| --- | --- | --- |
|  |  |  |

Address City/State List Dates

I certify that all information presented on this form is true and correct (incorrect information could result in student’s withdrawal). If the child has lived with someone other than parents or legal guardians during past two years, please explain fully on the back of this page.

**For School Use Only:**

DOB Verified / Birth Certificate # \_\_\_\_\_\_\_\_\_\_\_

Verification of Previous School Attendance:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of School Official Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s or Guardian’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Signature Date

This completed form must be kept on file in the student’s permanent Record**.**