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12465 Warwick Boulevard, Newport News, VA 23606-3041

**AFFIDAVIT  
ABSENCE OF CERTIFIED BIRTH CERTIFICATE**

Commonwealth of Virginia  
City of Newport News, to wit:

\_\_\_\_\_, being first duly sworn upon oath, based upon his/her personal knowledge, answers the following questions as noted in his/her handwriting, which are propounded by duly authorized officials of the Newport News Public Schools (Division) concerning a pupil's identity and age requesting enrollment as a pupil within the Division in accordance with **Section 22.1-3.1 of the Code of Virginia**.

1. What is your name? \_\_\_\_\_
2. Have you been advised by an official of the Division, and do you understand that you are required to answer the questions contained in this Affidavit as a condition to the enrollment and admission of a pupil into the Division because of your inability to supply the Division with a certified copy of the pupil's birth record? \_\_\_\_\_
3. **Do you understand that our School Board Policy JF-P says a parent/guardian must produce a certified birth certificate within ninety days from the time of enrollment in order for the child to remain in school, if an affidavit is submitted for school admission purposes?** \_\_\_\_\_
4. Do you understand that giving a false or otherwise untrue answer to any of the questions in this Affidavit could result in a criminal charge of perjury being brought against you? \_\_\_\_\_
5. Do you understand that when a question in this Affidavit asks if you have knowledge of or if you know of an instance or situation, it means that you are expected to relate any information received from other people, and to relate the source of your knowledge and information? \_\_\_\_\_
6. What is the full name of the pupil you wish to enroll in the Division?  
\_\_\_\_\_
7. What is the age, date of birth, and place of birth of the pupil being enrolled in the Division?  
**AGE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_  
**PLACE OF BIRTH:** \_\_\_\_\_

8. Who are the parents, parents by legal adoption, or person serving *in loco parentis* and responsible for the care of the pupil desired to be enrolled?

\_\_\_\_\_

Provide the address of residence of the person(s) listed above:

\_\_\_\_\_

9. Do you have legal custody imposed by a court order or have you been designated court appointed guardian for the pupil desired to be enrolled? \_\_\_\_\_

If so, what court entered such an order and what type of case was it (i.e., custody hearing, etc.)? \_\_\_\_\_

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

\_\_\_\_\_

11. **What documentary (written) proof can be or is offered of the pupil's identity and age?**  
(Attach copy of document presented.)

\_\_\_\_\_

12. To the best of your knowledge has the pupil ever been reported to any law enforcement agency as a missing child? \_\_\_\_\_

If response to question #11 is yes, identify by name and address the law enforcement agency and date of report.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
AFFIANT

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Witness my hand and official seal.

My Commission expires: \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

SEAL

Section 22.1-3.1 of the Code of Virginia