

## School District of the City of Pontiac

Office of Student Services/ Tonya L. Dixson, Director

## Affidavit Regarding Inability to Provide Student's Certified Birth Certificate

Michigan law requires a person enrolling a student in school to provide the local or intermediate school district with a certified copy of the student's birth certificate or other reliable proof of the student's identity and age. The pertinent part of the law states the following:

- 1. Upon enrollment of a student for the first time in a local or intermediated school district, the district shall notify in writing the person enrolling the student that within 30 days they shall provide to the local or intermediate school district either of the following:
  - a.) A certified copy of the student's birth certificate; b.) other reliable proof may include a baptismal certificate indicating date and place of birth, court record, count, military or immigration records, doctor or hospital records with a sworn statement, certain family records, life insurance policy, or, if none of these is provided, a sworn statement from a parent or guardian which must be notarized. C.) an affidavit explaining the inability to produce a copy of the birth certificate is required for any proof of item.
- 2. If a person enrolling a student fails to comply with subsection (1). The Director of Student Services will notify the person enrolling the student in writing that, unless he or she complies within 30 days after the notification, the case shall be referred to the local law enforcement agency.

declare that I am unable

3. The Director of Student Services will immediately report to the local law enforcement agency any affidavit received pursuant to this section that appears inaccurate or suspicious in form or content.

•	te for the following reason(s):	iac, at this time of enrolling the child name	
nstead of the	e required certified birth certificate	, I am providing the following documents:	
0	Non-certified Birth Certificate	o Hospital or Doctor Record	
0	Passport	o Immunization Record	
0	Baptismal Record	o Military Identification	
0	Other		
Student Name:		Birth Date:	Grade:_
Parent/Guard	lian Name (Print)		
arent/Guard	lian Signature:		