



COLLEGE of CENTRAL FLORIDA

COLLEGE OF CENTRAL FLORIDA OFFICE OF ADMISSIONS AND RECORDS HOME SCHOOL AFFIDAVIT

CF ID No.: [][][][][][]

Student's Legal Name: _____ Last First Middle (complete) Jr., etc. Former Name

Thank you for choosing to apply for admission to the College of Central Florida. In order to comply with the Florida Department of Education's guidelines governing enrollment in college level courses, we must have the following verification completed and notarized.

I, _____ as the parent or legal guardian of _____ Print name of parent/guardian Print student name

certify that:

- 1. I give this affidavit as a part of a request to have the student admitted to the College of Central Florida.
2. I have educated the student in a home school program in full compliance with all Florida laws including, but not limited to, Florida Statute 1002.41.
3. The student meets all legal and educational qualifications to be admitted to the College of Central Florida.
4. I acknowledge that this affidavit is given under oath and I understand the penalty for perjury or false statements.
5. The student has graduated from a Home School Education Program that meets the requirements outlined in Florida Statute 1002.41.

Date requirements for high school graduation were completed ____/____. MM/YY

Parent/Legal Guardian Signature Date: MM/DD/YY

Student Signature Date: MM/DD/YY

Notary: The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____, the parent, who has produced photo identification, and who did sign this affidavit.

Notary Signature

[stamp/seal]

Notary name printed Commission Expires: Date: MM/DD/YY

Please return this Affidavit to the Enrollment Services Center. Students participating in dual enrollment must turn in this form to the dual enrollment contact/advisor. If you are unable to complete the above verification, you will not be eligible for enrollment until you receive a state issued General Education Diploma (GED).

OFFICE OF ADMISSIONS AND RECORDS USE ONLY: Processed by: _____ Date: MM/DD/YY