



SOCIAL SECURITY NUMBER EXEMPTION FORM

ABOUT THIS DOCUMENT

The General Assembly of Georgia has authorized each local school system to request a parent or guardian provide the social security number of their child before being admitted to any public school (O.C.G.A. 2-20-150(d)).

The student's social security number will be used for identification purposes and will be incorporated into official school records pertaining to that student. The confidentiality of the number will be kept in accordance with applicable state and federal law.

Furnishing the child's social security number is strictly voluntary and will not affect any student's enrollment in the Pickens County School District.

If despite these assurances, you object to providing the school with your child's social security number, you must fill out this form and return it to the school.

I understand that my child will not be eligible for the Hope Scholarship because a 900 number will be used as a replacement number instead of the child's Social Security Number.

AFFIDAVIT FOR OBJECTING TO PROVIDE SOCIAL SECURITY NUMBER FOR ENROLLMENT

X _____ personally appeared before the undersigned notary public and swore or affirmed as follows:
Print Name of Parent/Guardian

I am the parent or legal guardian of:

Name of Child

Name of School

I object and decline to provide the Pickens County School District with my child's social security number.

This _____ day of: _____, _____
Day Month Year

X _____
Signature of Parent/Guardian

Sworn and subscribed before me this _____ day of: _____, _____
Day Month Year

X _____
Notary Public My Commission Expires