

**Exhibit D—Affidavit of Student Admission Information  
(for Participants in Address Confidentiality Program)**

**Notice to person signing affidavit:** A person who knowingly falsifies information on a form required for a student’s enrollment in a public school will be liable for tuition or other costs, as provided in Texas Education Code 25.001(h), if the student is not eligible for enrollment but is enrolled on the basis of false information. In addition, presenting false information or false records is a criminal offense under Texas Penal Code 37.10.

1. \_\_\_\_\_ seeks admission as a student to  
Clear Creek Independent School District.
2. My name is \_\_\_\_\_. My relationship to the student is  
\_\_\_\_\_. The name of the student’s parent or legal  
guardian residing in the District, if any, is: \_\_\_\_\_
3. The student is *(an adult who is enrolled in) (a minor residing with an adult who is en-  
rolled in)* the Texas Attorney General’s Address Confidentiality Program (ACP). A physi-  
cal home address will not be provided in writing. However, proof of participation in the  
ACP program, including a post office box address for all District mailings concerning the  
student, will be provided to the District. *(Attach copy of participant’s ACP card.)*
4. After consultation with an appropriate District administrator or designee regarding en-  
rollment eligibility, I certify that the student is eligible for enrollment in the District.
5. After consultation with an appropriate District administrator or designee and reviewing  
attendance policies, campus assignment policies, and attendance zones, the District  
representative and I have agreed on an appropriate campus for placement. I certify that  
the student is eligible for placement at the designated campus.
6. After reviewing policies and procedures regarding student transportation with an appro-  
priate District administrator or designee, I certify that the student is eligible for ridership  
on a District bus route for the designated campus. *(An administrator will verbally instruct  
the student’s bus driver as to the appropriate bus stop for the student.)*
7. The student *(is) (is not)* currently under an order for placement in an alternative educa-  
tion program or under an expulsion order. *(Attach a copy of the order. If a copy is not  
available, provide information regarding the basis for the order and the terms of the or-  
der.)*  
  
\_\_\_\_\_  
  
\_\_\_\_\_
8. I will notify the District administrator or designee if the student needs to change cam-  
puses due to any reason, including change of residence or grade level advancement.

Name of affiant (*print or type*): \_\_\_\_\_

Affiant's signature: \_\_\_\_\_

STATE OF TEXAS

COUNTY OF \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME on this the \_\_\_\_\_ (*date*) day of  
\_\_\_\_\_ (*month*), \_\_\_\_\_ (*year*).

\_\_\_\_\_, Notary Public, State of Texas

***For Office Use Only***

***(To be completed by District representative after consultation with person enrolling the student.)***

*(check only one)*

- Student is eligible for enrollment in the District.
- Student has been assigned to an appropriate campus.
- Administration has organized bus ridership.

Name of District representative (*print or type*): \_\_\_\_\_

District representative's signature: \_\_\_\_\_

Date: \_\_\_\_\_