



# AFFIDAVIT OF RELATIONSHIP FOR HOMESTAY PURPOSES

I, the undersigned, swear that I am a direct blood relative for the below-named person who will be living with me during his/her attendance at Christian Unified Schools of San Diego.

## STUDENT INFORMATION

Name in Full: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

How Related: \_\_\_\_\_

## RELATIVE INFORMATION\*

Name in Full: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Present Address: \_\_\_\_\_

The affidavit of relationship is made by me for the purpose of assuring Christian Unified Schools of San Diego (CUSSD) that such student is indeed a direct relation.

I swear to the following:

- I am not using this form to circumvent any of the home stay or designated guardian requirements.
- I will assume full 24-hour/7day supervision of the student in my home.
- I will support the mission, vision, and policies of CUSSD.
- The information I am providing is true and honest.

\_\_\_\_\_  
(Signature of Relative)

\_\_\_\_\_  
(Print Relative Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent of Student)

\_\_\_\_\_  
(Print Parent of Student Name)

\_\_\_\_\_  
(Date)

### \* ATTACH COPIES OF THE FOLLOWING:

- **LEGAL IDENTITY** (VALID PASSPORT / DRIVER'S LICENSE)
- **LEGAL RESIDENCE** (UTILITY BILL / PROPERTY TAXES, ETC.)