

Sworn Affidavit of Family Ties in Florida

To support the claim as a Florida resident for tuition purposes (TIER 2 of F.S. 1009.21)

Student ID Number	Student Last Name	First Name	Middle Initial
Student 1D Normber	Stodent Last Name	THISTINGINE	ivildale illitiai
Student's Relative:			
	Relative Last Name	First Name	Middle Initial
l,	(relative full name) hereby swear or affirm the truthfulness of these facts.		
 I am over the age of 18 and competent to give this testimony. All of the information provided in this affidavit is true and correct and based upon my own personal knowledge of these facts. My home address is: 			
4. I have resided at this address since:		(date residency began at this address).	
5. I have maintained legal ties to the state of Florida for the past 12 consecutive months.			
	oriver's License, Voter ID, Vehicle reg.): a residency. See back of this form for options. Docume	nts must be attached to this form.)	
6. The student named above is my		(indicate family relationship. Relationship must be	
immediate family such as parents, children, spouse, or surviving spouse of the member, or any other relative by blood, marriage, or adoption FS 657.002)			
7. The student named above, my immediate family, has resided in Florida since:			
I understand that I am swearing or affirming under oath the truthfulness of the facts asserted above by me in this affidavit. I further understand that the punishment for knowingly making a false statement under oath includes fines and/or imprisonment.			
Signature	Date		
State of Florida County of			
Sworn to and subscribed be	fore me this day of	, 20	

provided

Notary Public Signature

personally known to me or

The affiant is

as identification.