

Active Military Affidavit

STATE OF _____,

COUNTY OF _____, to-wit:

I, _____, being duly sworn deposes and states as follows under penalty of perjury:

1. I am a West Virginia resident.
2. I am required to be temporarily located outside of a West Virginia pursuant to a military order.
3. I have a permanent residence at the following West Virginia address:

4. I am the parent or guardian of the minor child/children indicated below in paragraph number 5.
5. I affirm that I have or share actual physical possession, or care and custody, of the child/children, named below:

- _____ age _____
- _____ age _____
- _____ age _____
- _____ age _____

6. I affirm that I intend to act on behalf of the minor child/children indicated above in paragraph number 5 as an Authorized Account Holder for the Hope Scholarship

Program pursuant to the Hope Scholarship Act W. Va. Code §18-31-1 et. seq. and W.Va. Code St. R. § 112-18-5.1.

7. I affirm I will maintain my West Virginia residency.
8. I affirm my compliance with all Hope Scholarship Program rules and requirements, including but not limited to, those rules and requirements related to eligibility and academic progress reporting, if applicable.
9. I affirm that my child/children will not participate in a full-time public school program if I receive funds through the Hope Scholarship Program while I am temporarily located out of state.
10. I hereby swear or affirm that the information above is true, accurate, and complete to the best of my knowledge. No relevant information has been omitted.

Dated: _____

[Signature]

NOTARY PUBLIC

Subscribed and sworn to before me, this _____ day of _____, 20____.

Notary Seal

Signature of Notary

Notary

My commission expires: _____, 20____.