

Resources for Immigrant Families Affected by Enforcement Actions

To: Priests

From: Vanessa Russell, Chief Executive Officer, Catholic Charities Atlanta

On June 17, President Trump announced that Immigration and Customs Enforcement (ICE) officers were going to begin enforcement actions on thousands of immigrant families. Raids were scheduled for Atlanta, Baltimore, Chicago, Denver, Houston, Los Angeles, Miami, New Orleans, New York and San Francisco targeting individuals who already have deportation orders. Individuals in the U.S. with lawful status or individuals who are actively fighting their immigration cases were not targets for the raids. Up to 2,000 individuals were expected to be impacted. In response to the President's announcement, the Most Reverend Joe S. Vasquez, Bishop of Austin and Chair of the USCCB Committee on Migration, issued a statement declaring:

"We recognize the right of nations to control their borders in a just and proportionate manner. However, broad enforcement actions instigate panic in our communities and will not serve as an effective deterrent to irregular migration. Instead, we should focus on the root causes in Central America that have compelled so many to leave their homes in search of safety and reform our immigration system with a view toward justice and the common good. We stand ready to work with the Administration and Congress to achieve those objectives.

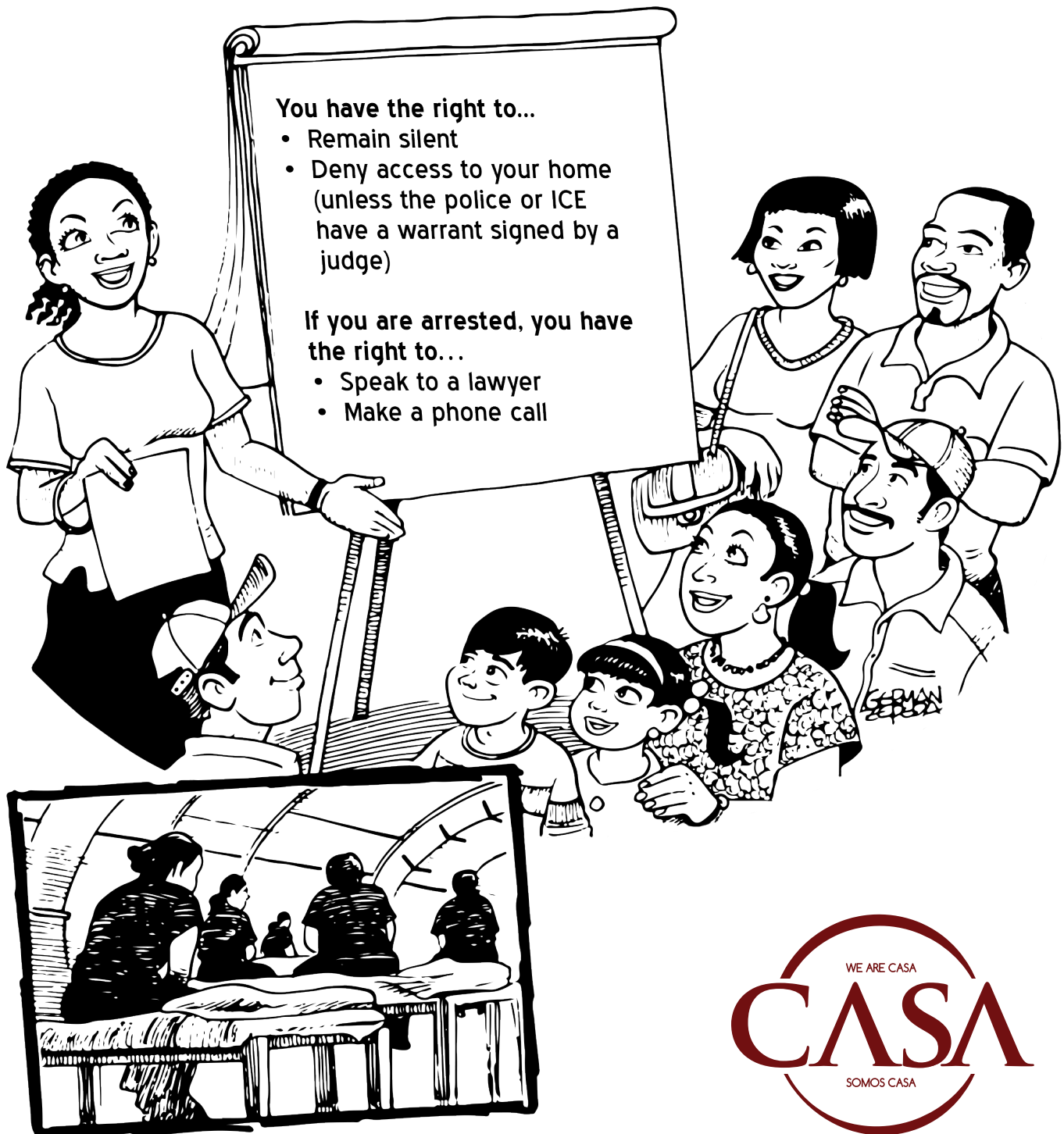
During this unsettling time, we offer our prayers and support to our brothers and sisters, regardless of their immigration status, and recognizing their inherent dignity as children of God."

Hours before the predawn raids were to begin, the President declared that the enforcement actions are being delayed for at least two weeks in order "to allow for negotiations on Capitol Hill regarding immigration reform."

To assist families who might be effected, USCCB/MRS created a resource page that can be used to prepare and protect individuals in case they or a family member is detained by ICE. We are providing the information to you for use in your parish. The resource page is in English and Spanish. We hope you find these resources helpful.

KNOW YOUR RIGHTS!

Protect Yourself And Your Family During Immigration Raids



You have the right to...

- Remain silent
- Deny access to your home (unless the police or ICE have a warrant signed by a judge)

If you are arrested, you have the right to...

- Speak to a lawyer
- Make a phone call



 @CASAforAll  @CASAforAll

Updated March 2017

* The contents of this booklet do not constitute legal advice. Consult an attorney for legal advice.

IF YOU ARE STOPPED ON THE STREET OR IN A PUBLIC PLACE

Police or ICE agents may stop you in a public place and ask you questions. You do not have to answer their questions.

If they do not have a warrant, the authorities **MAY NOT** arrest you unless they have evidence that you have committed a crime or are not authorized in the United States.



Ask the officer: "**AM I BEING ARRESTED OR DETAINED?**"

- If the officer says "**NO**" ask the officer if you may leave.
 - o When the officer says "**YES**", walk away slowly.
 - o Do not answer any questions.
- If the officer says "**YES**" then you should:
 - o Give the officer your Know Your Rights card and exercise your **RIGHT TO REMAIN SILENT**.
 - o Tell the officer you want to **SPEAK WITH AN ATTORNEY**

NEVER provide the officer with fake documents or with any type of foreign identification (passport, consular ID, etc.). This may be used against you in future deportation proceedings.

NEVER lie to a police officer or immigration officer, because this can also be used against you. Instead, remember to **REMAIN SILENT**.



IMPORTANT!

In some states, but not in Maryland, it is a minor crime not to provide your name when asked by a police officer.

IF IMMIGRATION (OR THE POLICE) COME TO YOUR HOME

YOU HAVE THE RIGHT TO SEE A VALID WARRANT

1) Ask the officer to slip the warrant under the door.

DO NOT OPEN THE DOOR!

If you open the door, this can be considered consent to a search, even if they don't have a valid warrant.



A warrant is a paper signed by a **JUDGE** giving the officer permission to enter your home. (see page 3)

It needs to say:

- a. The areas that need to be searched; and/or
- b. The individual(s) and/or objects to be seized

An administrative warrant issued by an immigration official (including an immigration judge) is not a valid warrant and **DOES NOT** grant anyone authority to enter your home. (see page 4)

If the officer enters your home without a valid warrant, and without your permission, get the officers' badge number(s) and say

"I DID NOT CONSENT TO THIS SEARCH."

2) If the officer has a valid warrant, signed by a judge:

You must allow them access to the areas of your home described in the warrant.

If they search areas not listed in the warrant, document this and get a receipt for any property taken.

If they ask you or anyone in your family questions, assert your **RIGHT TO REMAIN SILENT** and follow the instructions for an encounter in a public space.

NEVER provide the officer with fake documents or any document issued by a foreign country.

NEVER lie to the officers.

EXERCISE YOUR RIGHT TO REMAIN SILENT.

EXAMPLE OF A VALID WARRANT

UNITED STATES DISTRICT COURT DISTRICT OF MARYLAND

SEARCH WARRANT

In the Matter of the Search of
(Name, address or brief description of person or property to be searched)

**123 MAIN STREET
ANNAPOLIS, MD 21403**

CASE NUMBER: 01-1111 ABC

TO: ICE SPECIAL AGENT JOHN SMITH and any Authorized Officer of the United States
Affidavit(s) having been made before me by ICE SPECIAL AGENT JOHN SMITH who has reason to believe
that on the person or on the premises known as (name, description and or location)

FOR DETAILED DESCRIPTION, SEE ATTACHMENT "A" TO THE AFFIDAVIT WHICH IS ATTACHED HERE TO AND
INCORPORATED HEREIN BY REFERENCE

in the District of Maryland, there is now concealed a certain person or property , namely (describe the person or
property)

SEE ATTACHMENT "B" TO THE AFFIDAVIT WHICH IS ATTACHED HERE TO AND INCORPORATED HEREIN BY
REFERENCE.

I am satisfied that the affidavit(s) and any recorded testimony establish probable cause to believe that the
person or property so described is now concealed on the person or premises above-described and establish
grounds for the issuance of this warrant.

YOU ARE HEREBY COMMANDED to search on or before the 4th DAY OF JULY, 2008,

(not to exceed 10 days) the person or place named above for the person or property specified, serving this
warrant and making the search (in the daytime 6:00 A.M. to 10:00 P.M.) and if the person or
property be found there to seize same, leaving a copy of this warrant and receipt for the person or property
taken, and prepare a written inventory of the person or property seized and promptly return this warrant to
the Honorable James K. Bredar, United States Magistrate Judge, as required by law.

Baltimore, Maryland



THE HONORABLE JAMES K. BREDAR
UNITED STATES MAGISTRATE JUDGE

SIGNED BY A JUDGE

EXAMPLE OF A INVALID WARRANT

File No.

DATE:

To any officer of the United States Immigration and Naturalization Service:

ROBERTO GONZALEZ

Alias

(Full name of alien)

entered the United States at

on or about

(Place of entry)

Is subject to removal/deportation from the United States, based upon a final order by:

- an immigration judge in exclusion, deportation, or removal proceedings
- a district director or a district director's designated official
- the Board of Immigration Appeals
- a United States District or Magistrate Court Judge

and pursuant to the following provisions of the Immigration and Nationality Act.

Section 237(a)(2)(A)(iii) of the Immigration and Nationality Act, as amended.

I, the undersigned officer of the United States, by virtue of the power and authority vested in the Attorney General under the laws of the United States and by his or her direction, command you to take into custody and remove from the United States the above-named alien, pursuant to law, at the expense of the Immigration and Naturalization 2003, including the expense of an attendant if necessary.

(Signature of INS Official)

Interim Field Director, Detention and Removal Operations

(Title of INS Official)

Portland, Oregon

(Date and office location)

NOT SIGNED BY A JUDGE

IF YOU ARE STOPPED IN YOUR CAR

- Remain in the car. Put your hands on the steering wheel so that the officer can see them.
- Ask who stopped you. Get the agency the officer works for and their badge number.

If you are undocumented, DO NOT answer any questions about your immigration status.

YOU CAN REFUSE TO ANSWER QUESTIONS LIKE:

"Are you legal?"

"Do you have papers (or a green card)?"

"Where are you from?"

"Where were you born?"

- If you have a valid driver's license and registration, give those to officer.

NEVER provide the officer with fake documents or any document issued by a foreign country.

If you give the police or ICE false documents:

- o **YOU CAN** be charged and convicted with a federal crime.
- o **YOU WON'T** be able to be released on bond
- o **YOU** risk **PERMANENT EXPULSION** from the U.S., if the documents belong to a United States citizen.

If the officer asks a **PASSENGER** for identification:

1. They can refuse to provide ID
2. They can say:
 - "I would prefer not to answer your questions here. If I am charged with a crime, I want to speak with my attorney first."
 - "I am simply a passenger. I do not wish to give my ID."

The police will return to their car and check the name on your driver's license in a national database. This database includes criminal warrants from all over the U.S. and since 2002 it has included deportation orders. If you have ever had contact with immigration in the past, you might have a deportation order and not know it.

**YOU HAVE THE RIGHT TO REFUSE A SEARCH OF YOUR CAR OR YOUR BODY
(UNLESS THEY HAVE A WARRANT OR CAUSE TO THINK YOU COMMITTED A CRIME)**

IF YOU ARE STOPPED IN YOUR CAR

If the officer gives you a ticket, make sure you pay it or appear in court (if required).

If the officer indicates that you are being **ARRESTED**:

- o Give the officer your Know Your Rights card and exercise your **RIGHT TO REMAIN SILENT**.
- o Tell the officer you want to **SPEAK WITH AN ATTORNEY**

How to prepare for a traffic stop:

- 1) Only drive if you have a valid driver's license and always carry it with you.
- 2) Have your registration, insurance and car inspection up to date
- 3) Have proof of insurance and registration with you whenever you drive.

** If you reside in Maryland, you can obtain a license at any Maryland Motor Vehicle Administration (MVA) office. Visit <http://mva.state.md.us> to learn about the requirements of obtaining a license in Maryland.*



IF IMMIGRATION (OR POLICE) COME TO YOUR WORKPLACE

Immigration and the police can only enter non-public areas of your workplace with either a valid warrant or permission from your employer. If possible, talk to your co-workers and your employer about refusing to allow immigration access to your workplace.

If ICE agents do enter your workplace, stay calm. Do not run. This may be viewed as an admission that you have something to hide.

YOU HAVE THE SAME BASIC RIGHTS AT WORK AS YOU DO IN A PUBLIC SPACE:

- You have the **RIGHT TO REMAIN SILENT**
- **DO NOT** say anything about where you were born
- You have the right to **REFUSE A SEARCH** (unless they have a warrant or cause to think you committed a crime)
- You have the **RIGHT TO REQUEST AN ATTORNEY**



IF THEY TELL YOU THAT YOU ARE UNDER ARREST OR BEING DETAINED, GIVE THEM YOUR KNOW YOUR RIGHTS CARD.

NEVER provide the officer with fake documents or any document issued by a foreign country.

NEVER lie to the officers.

EXERCISE YOUR RIGHT TO REMAIN SILENT!



IF YOU ARE ARRESTED BY IMMIGRATION, YOU SHOULD

1. FIND OUT WHO ARRESTED YOU

Ask for the name and agency of the person who arrested you. Get their badge number and license plate which should be on their uniform and car.

2. ASK TO SEE YOUR LAWYER

You always have the right to speak with a lawyer. **Government officials may try to intimidate you or trick you into signing.** Don't let yourself be tricked! If you don't have a lawyer yet, you still have the right to obtain one.

In immigration cases, the government will NOT give you a free lawyer.

3. ASSERT YOUR RIGHT TO REMAIN SILENT

Do not give any information to the police or ICE without talking to your lawyer first.

4. DO NOT SIGN ANYTHING

Before consulting with your lawyer. You may be signing away your right to a hearing before an immigration judge.

5. CONTACT LAWYER OR FAMILY MEMBER

You have the right to make a telephone call after you are arrested. Memorize the telephone number of your attorney, family member, friend or union spokesperson, and contact him/her immediately.

6. CONTACT YOUR CONSULATE

If you are a foreign national arrested in the U.S., you have the right to call your consulate or to have the deportation officer inform the consulate of your arrest. Memorize their phone number or ask family member to call.

7. ASK FOR BOND

Even if immigration says you are not eligible. Bond is paying a certain amount of money to be released from jail. In exchange, you then promise to return for your court date. You have to show that you are not a flight risk or a danger to the community.

Also, get a copy of the "**Notice to Appear**," a document that contains the immigration charges against you.



IF YOU ARE ARRESTED BY THE POLICE AND CHARGED WITH A CRIME



1. FIND OUT WHO ARRESTED YOU

Ask for the name and agency of the person who arrested you. Get their badge number and license plate which should be on their uniform and car.

2. ASK TO SEE YOUR LAWYER

You always have the right to speak with a lawyer. Government officials may try to intimidate you or trick you into signing. Don't let yourself be tricked! In criminal cases, if you cannot afford an attorney, the government will provide one for you.

3. ASSERT YOUR RIGHT TO REMAIN SILENT

Do not give any information to the police or ICE without talking to your lawyer first.

4. DO NOT SIGN ANYTHING

Before consulting with your lawyer.

5. CONTACT LAWYER OR FAMILY MEMBER

You have the right to make a telephone call after you are arrested. Memorize the telephone number of your attorney, family member, friend or union spokesperson, and contact him/her immediately.

6. ASK YOUR LAWYER TO HELP YOU GET RELEASED FROM CUSTODY

Depending on how serious the charges are, you may be released by promising to show up for your next hearing, or you may be given bail. If you are given bail, you will have to pay some money to be released from custody.

7. IF YOU ARE NOT A U.S. CITIZEN, MAKE SURE YOUR ATTORNEY CONSULTS WITH AN IMMIGRATION ATTORNEY

Criminal cases can have serious immigration consequences. It is important that your attorney develops a plan for your case with an immigration attorney before you pay bail or do anything else on your case.

IMMIGRANT DETAINERS!

When you are in criminal custody, ICE may try to issue something called a "detainer" to stop you from being released. This is a request for the jail to hold you for up to an extra 48 hours (not including weekends and holidays). Some jails honor these detainers, some jails don't, and many only honor them in certain circumstances. You should tell your lawyer about your immigration status and make sure you do not have a detainer before you are released from jail.

DEVELOP A SAFETY PLAN

AT WORK

1. Talk to your coworkers. If possible, get them all to agree to remain silent if ICE comes to your job.
2. Remember to remain calm and **DO NOT RUN** if ICE comes to your workplace. Remain silent and, if they arrest you, tell them you want to talk to your lawyer.
3. If there is a union at your job, contact your union spokesperson to develop a plan for if there is an immigration raid.

AT HOME

1. Know what documents you should carry with you

- o Carry a valid U.S. ID (like a driver's license) if possible
- o If you have a green card, carry it with you (or a copy of it)
- o Carry a card with the contact information of your immigration attorney and/or union representative.
- o Carry a card, indicating that you wish to remain silent. A sample card is attached on the back.

2. Make a plan to care for your family:

Personal Information Make sure your family or trusted friends know your:

- o Immigration "A" number (if you have one). This is a 9 digit number that is used to identify anyone who has had ever had contact with immigration. It may start with an "A". It will be on any immigration document you've ever received (like a court notice, a work permit or other document).
- o Exact Name
- o Exact Date of Birth
- o Country of Origin or citizenship (usually where you were born)



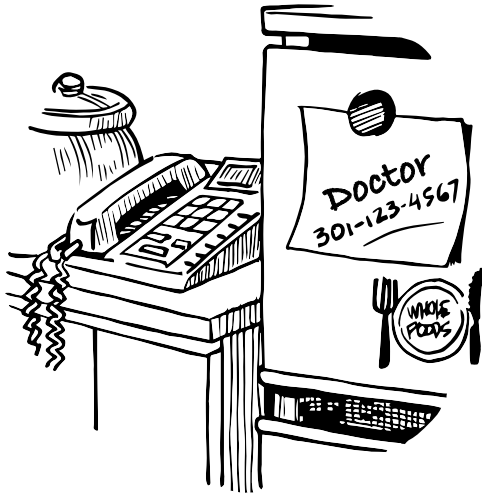
Child Care

If you have children or elderly relatives, make arrangements in advance for a family member or friend to care for them if you are detained. Have the telephone numbers of this relative or friend with you at all times and make sure other people know of these plans. **You can use a limited power of attorney form for this.**

Finances

Make sure you designate individuals you trust to make decisions for you if you are detained. They can help you withdraw money for deportation expenses or pay a mortgage. Financial institutions may require you to execute a power of attorney for this. Check with your bank or financial service provider.

DEVELOP A SAFETY PLAN



3. Have copies of all of your important documents

Make sure your family has copies of all your important documents, including:

- o Immigration Documents including records of any immigration status you ever had, of any prior filings with immigration or other immigration related documents.
- o Birth certificates for you and your children
- o Marriage certificate
- o Passports for you and your children
- o Names and contact information for lawyers. Include anyone who has ever represented you in the past, and a list of lawyers who might be able to help defend you in immigration court.
- o Any other important papers (deed to your house, etc.)

PLACE THESE DOCUMENTS IN A SECURE, EASY TO FIND LOCATION.

4. Make sure your family knows how to find you

If they have all of your personal information, they can go to the ICE Locator website and find out where you are being detained: www.locator.ice.gov or (if they were detained in Maryland) you can also try to call the Baltimore field office at 410-637-4000.

5. Save money to pay for an attorney and cover other expenses

You have a right to an attorney to help defend you in your immigration case, but unlike in a criminal case, the government will not provide you one for free. Your family may also need to cover expenses while you're in detention, since you will not be able to work.

6. Find an immigration attorney

Keep a list of organizations and private attorneys who might be able to help you with your immigration case. CASA has a referral list we can provide you with, or you use one of these websites to search for immigration attorneys and organizations:

CASA

301-431-4185

www.wearecasas.org

Immigration Advocates Network

Immigration Legal Services Directory:

<https://www.immigrationadvocates.org/nonprofit/legaldirectory>

American Immigration Lawyers Association

<http://www.aialawyer.org/>



FAMILY SAFETY PLAN

This section is intended to help you make a plan in case you are detained by immigration officials. None of the information in this guide is intended as legal advice. We recommend you consult with an attorney to develop a more detailed plan for the security of your family and your finances.

The Limited Power of Attorney form included herein is **meant only to serve as an example** and **does not substitute** for a permanent child custody arrangement. CASA recommends that you consult with a family law attorney to develop a plan that works for your family.

SAFETY PLAN CHECK LIST

Collect and Maintain a binder of the following documents:

- | | |
|---|--|
| <input type="checkbox"/> Birth certificate | <input type="checkbox"/> Military paperwork |
| <input type="checkbox"/> Copy of consular ID | <input type="checkbox"/> Business paperwork |
| <input type="checkbox"/> Copy of passport | <input type="checkbox"/> Work paychecks |
| <input type="checkbox"/> Copy of any other form of ID | <input type="checkbox"/> Medical records |
| <input type="checkbox"/> Educational degrees | <input type="checkbox"/> Criminal records |
| <input type="checkbox"/> Marriage license (if applicable) | <input type="checkbox"/> Immigration record |
| <input type="checkbox"/> Birth certificate(s) of your children with your name listed | <input type="checkbox"/> Visa, work permit, A#, deportation order, ICE paperwork |
| <input type="checkbox"/> Children's passports | <input type="checkbox"/> Legal paperwork from lawyers you have worked with previously |
| <input type="checkbox"/> Children's medical records | <input type="checkbox"/> Police paperwork proving you were the victim of a crime |
| <input type="checkbox"/> Emergency numbers and important contact information | <input type="checkbox"/> Paperwork proving you are the witness of a crime in the United States and are cooperating in an investigation |
| <input type="checkbox"/> Power of Attorney | <input type="checkbox"/> Paperwork of a pending civil rights complaint |
| <input type="checkbox"/> Any other documents you want to be able to quickly find | |
| <input type="checkbox"/> Your house or property paperwork (leases, rent payment receipts) | |
| <input type="checkbox"/> List of all properties you lived in while in the U.S. | |

CHILDREN'S INFORMATION
Complete this for each of your children

CHILD'S NAME	
Date of Birth	
Child's Cell Phone Number	
SCHOOL INFORMATION	
School Name	
School Address	
School Phone Number	
Teacher's Name	
Classroom Number	
Afterschool Program Name	
Afterschool Program Phone Number	
MEDICAL INFORMATION	
Allergies	
Medical Conditions	
Medications	
Health Insurance Information	
Doctor's Name	
Doctor's Phone Number	
Doctor's Address	
CHILD'S NAME	
Date of Birth	
Child's Cell Phone Number	
SCHOOL INFORMATION	
School Name	
School Address	
School Phone Number	
Teacher's Name	
Classroom Number	
Afterschool Program Name	
Afterschool Program Phone Number	
MEDICAL INFORMATION	
Allergies	
Medical Conditions	
Medications	
Health Insurance Information	
Doctor's Name	
Doctor's Phone Number	
Doctor's Address	

EMERGENCY NUMBERS AND CONTACT INFORMATION

EMERGENCY NUMBERS	
Immediate Emergency	911
Police Department	
Fire Department	
Poison Control	
FAMILY CONTACTS	
Mother (or guardian)	
Cell Phone Number	
Home Phone Number	
Work Name	
Work Phone Number	
Work Address	
Father (or guardian)	
Cell Phone Number	
Home Phone Number	
Work Name	
Work Phone Number	
Work Address	
Other Emergency Contact	
Relationship	
Cell Phone Number	
Home Phone Number	
Other Emergency Contact	
Relationship	
Cell Phone Number	
Home Phone Number	

MISCELLANEOUS CONTACTS

DOCTOR	
Phone Number	
Health Insurance Company	
Policy Number	
PEDIATRICIAN	
Phone Number	
Health Insurance Company	
Policy Number	
DENTIST	
Phone Number	
Dental Insurance Company	
Policy Number	
CAR MAKE/MODEL	
License Plate Number	
Car Insurance Company	
Insurance Policy Number	
Phone Number	
CONSULATE	
Address	
Phone Number	
ATTORNEY/NONPROFIT LEGAL SERVICES	
Address	
Phone Number	

NOTES

KNOW YOUR RIGHTS CARD

Present the following card to immigration or the police if you are arrested in order to exercise your right to remain silent and to request an attorney.

My name is: _____



This is to advise any law enforcement officer that I cannot answer any questions (other than my name), sign any papers, or consent to any search until I have had the opportunity to speak with a lawyer.

Please let me know if I am under arrest or free to go. If I am under arrest please allow me to make a phone call so that I can secure legal counsel.

Thank you.

You have the right to:



1. **Identify yourself** with your name
2. **You don't have to** answer any more personal questions
3. **Say** that you want to speak to a lawyer
4. **If they attempt to search** you, your car, your home, or your belongings, say that you **DO NOT** consent to the search.
5. **If you are arrested** you have the right to:
 - Remain silent
 - Speak with a lawyer (**DO NOT** sign anything before this)
 - Make a call
6. **Remain calm** and act respectfully

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Me llamo: _____



Esta tarjeta sirve para informar a cualquier oficial, que no puedo contestar sus preguntas (más allá de mi nombre), no firmare ningún papel, y no consentiré a ser revisado hasta que tenga la oportunidad de hablar con un abogado.

Por favor infórmeme si estoy bajo arresto o libre de irme. Si me está deteniendo, por favor permítame hacer una llamada para obtener un abogado defensor.

Gracias.

Usted tiene derecho a:



1. **Identificarse** con su nombre
2. **No tiene que** contestar preguntas personales
3. **Decir que quiere** hablar con un abogado
4. **Si intentan revisarlo** a usted, su coche, su casa, o sus efectos, diga que **NO CONSIENTE**.
5. **Si le arrestan** tiene derechos de:
 - Guardar silencio
 - Hablar con un abogado (**NO FIRME** nada antes de eso)
 - Hacer una llamada
6. **Mantenga la calma** y sea respetuoso

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These materials were prepared through the collaboration of:

CASA

Detention Watch Network

National Immigration Project of the National Lawyer's Guild

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Dedicated to the memory of Juan Carlos Ruiz who inspired and helped to develop this document.

Layout and Popular Methodology

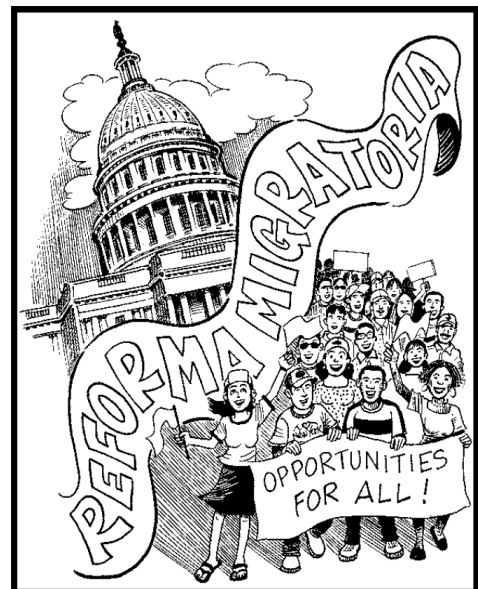
CASA

Illustrations

German Zepeda

For more information visit: www.wearecasa.org

Updated 2017



¡Conozca sus derechos!

COMO PROTEGER A USTED Y A SU FAMILIA DURANTE LAS REDADAS MIGRATORIAS



El gobierno de los EEUU ha arrestado o detenido a personas que no son ciudadanos estadounidenses.

¡Infórmese sobre cómo se puede proteger si eso le llega a suceder!

QUE HACER SI ES INTERROGADO POR LA POLICIA

QUE HACER SI ES INTERROGADO POR LA POLICIA:

Ud. tiene el derecho de preguntar al policía si Ud. esta siendo arrestado o detenido.

1. Si el oficial dice “NO, Ud. no esta siendo arrestado o detenido”, pregúntele al oficial si Ud. se puede ir. Si el oficial le dice que se puede ir, váyase lenta y calmadamente.

2. Si el oficial dice “SI, Ud. esta siendo arrestado o detenido” ...

¡UD TIENE EL DERECHO A GUARDAR SILENCIO!

SI NO TIENE DOCUMENTOS...

- ✓ No conteste a ninguna pregunta, o diga solamente “necesito hablar con mi abogado”.
- ✓ Si Ud. tiene documentos de inmigración que están válidos, muéstrelos. Siempre llévelos con Ud.
- ✓ No diga nada acerca de donde nació o como entró a los Estados Unidos.
- ✓ No lleve consigo papeles de otro país. (Si lo hace, el gobierno puede usar esta información en un proceso de deportación).
- ✓ Muéstreles la tarjeta de “¡Conozca sus derechos!” que acompaña a este folleto.

¡Sobretudo, no muestre documentos falsos y no mienta!



¡IMPORTANTE!

En algunos estados constituye un delito menor no revelar su nombre cuando un agente de policía se lo pregunte. Si bien es menor la pena que corresponde a este delito, aún así le podrían arrestar por no revelar su nombre. Recuerde que revelar el nombre también tiene sus riesgos y lo pueden usar para iniciar un proceso de deportación.

SI INMIGRACIÓN LLEGA A SU VIVIENDA...

SI LA POLICÍA O INMIGRACIÓN VIENE A SU CASA:

Usted tiene derecho a ver la orden si la policía, agentes de inmigración u otro agente de gobierno intenta entrar a su casa. Una orden es un papel firmado por un juez que autoriza al agente a entrar a su casa. La orden debe especificar detalladamente cuáles son los lugares que el agente tiene derecho a registrar. No le abra la puerta.

Pídale al agente que pase la orden por debajo de la puerta. Si abre la puerta y le da permiso al agente para que entre a su casa, se puede considerar que usted le ha dado su “consentimiento” para que entre. Si entra sin la orden, pida los nombres y números de placa de los agentes y dígalos que usted no “da su consentimiento” para realizar el registro. Tome nota también de los nombres, las direcciones y los números de teléfono de toda persona que haya presenciado el suceso.

Si el agente tiene una orden, observe el registro para determinar si el agente registra algún lugar que no se haya especificado en la orden. Solicite un recibo por todo lo que se lleve el agente.



SI LA POLICÍA O INMIGRACIÓN LLEGA A SU LUGAR DE TRABAJO:

Los agentes de inmigración deben tener una orden de registro firmada por un juez o la autorización del empleador para entrar a su lugar de trabajo. Si se trata de un lugar público, no necesitan la orden.

Mantenga la calma. No huya pues puede interpretarse como admisión de que tiene algo que ocultar.

SI LA POLICÍA O INMIGRACIÓN LO DETIENE EN LA CALLE O EN UN LUGAR PÚBLICO:

Si la policía o un agente de inmigración lo detiene en la calle sin la debida orden, no puede arrestarlo a no ser que tenga pruebas de que usted no es ciudadano. Recuerde que tiene derecho a guardar silencio y a negar que los registren. No diga nada acerca de su situación migratoria o donde nació. Si Ud. tiene documentos migratorios válidos, muéstrelos.

SI LO ARRESTAN, DEBE...

1. AVERIGUAR QUIÉN LO ARRESTÓ

Tome nota de los nombres de los agentes, organismos a los que pertenecen (la policía, el jefe de policía del condado, FBI, Inmigración) y números de identificación y de placa de sus vehículos. Esta información se obtiene de sus uniformes o de sus automóviles.

2. NO FIRME DOCUMENTACIÓN ALGUNA SIN HABLAR CON UN ABOGADO

Los agentes de gobierno pueden intentar presionarlo o engañarlo para que firme. No se deje engañar. Porque puede ser lo mismo que renunciar a su derecho a tener una audiencia ante un juez de inmigración. Ud. siempre tiene el derecho de hablar con un abogado

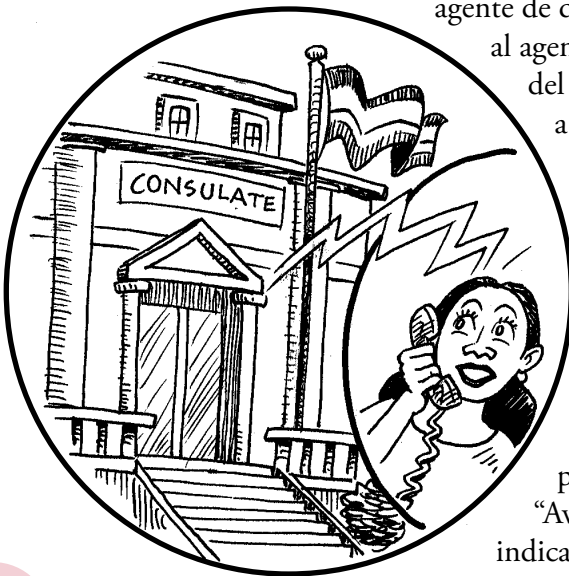


3. COMUNÍQUESE CON SU ABOGADO O CON UN FAMILIAR

Tiene derecho a hacer una llamada telefónica después de su arresto. Memorice el número de teléfono de su abogado, de un familiar o de un representante sindical y contáctelo de inmediato.

4. COMUNÍQUESE CON SU CONSULADO

Los extranjeros arrestados en los EEUU tienen derecho a llamar al consulado de su país o a solicitar al agente de deportación que notifique de su arresto al consulado. Pídale al agente de deportación una lista de embajadas y tome nota del número telefónico. El cónsul de su país le puede ayudar a encontrar un abogado o le puede ofrecer contactar a su familia.



5. SOLICITE FIANZA

Una vez que Inmigración lo tiene en su custodia, solicite la fianza (aunque Inmigración diga que no es apto.) Debe demostrar que no constituye un riesgo de fuga ni un peligro para la comunidad. Solicite además una copia del "Aviso de comparecencia." Este es un documento en que se indican los cargos de inmigración formulados en su contra.

SI SE LE ACUSA DE UN DELITO...

PIDA AYUDA A SU ABOGADO PARA QUE LA POLICÍA LO DEJE EN LIBERTAD

Si la policía local lo arresta, deben presentar los cargos ante un tribunal antes de las 48 horas (sin contar el fin de semana ni días festivos), de lo contrario se le tiene que dejar en libertad. Si la policía no formula cargos penales, la misma debe dejarlo en libertad si (1) se retiran los cargos, (2) se le concede la fianza y usted la paga, (3) gana su caso penal o (4) cumple con la pena.

La policía puede contactarse con los agentes de inmigración para determinar su situación migratoria. Por ejemplo, si usted tiene una orden de deportación pendiente, la policía puede informar a Inmigración que usted se encuentra en custodia policial. Después, Inmigración puede solicitar una orden de detención (detainer) que les da 48 horas más para ir a buscarlo.

Si Inmigración no lo busca dentro de este plazo, la policía tiene la obligación de dejarlo en libertad. Si la policía no formula cargos penales Y además Inmigración no presenta la orden, pida ayuda a un abogado o una organización comunitaria para que la policía lo deje en libertad. Ambos pueden enviar una carta a la cárcel o al alguacil, exigiendo su libertad.

¿QUÉ DEBE HACER SI SE LE ACUSA DE UN DELITO?

Consulte con un abogado de inmigración para asegurarse que el delito no vaya a afectar su situación migratoria. Si desea solicitar la ciudadanía o residencia permanente (la tarjeta verde), hable con su abogado.



¿QUÉ HACER SI ENFRENTA LA DEPORTACIÓN Y NECESITA UN ABOGADO?

Busque un abogado especializado en la defensa de casos de deportación. Siempre lleve consigo el nombre completo y los datos de contacto de su abogado. Solicite a su abogado un contrato por escrito antes de pagarle sus honorarios. Asegúrese que su abogado examine el Aviso de comparecencia (NTA - Notice to Appear) o sus documentos de inmigración antes de hacer cualquier promesa.

¡No se deje engañar por aquellos que sólo quieren su dinero!

PREPARE UN PLAN DE EMERGENCIA

1. ELABORE UN PLAN DE ACCIÓN CON SUS COMPAÑEROS DE TRABAJO

- ✓ Hable con sus compañeros de trabajo para ver si estarían dispuestos a tomar la decisión colectiva de que todos – cualquiera que sea su situación migratoria – guardarán silencio y solicitarán hablar con un abogado en caso de una redada en el lugar de trabajo.
- ✓ Diga a sus compañeros que no se den a la fuga y permanezcan tranquilos en caso de una redada.
- ✓ Si existe un sindicato en su lugar de trabajo, contáctese con su representante sindical para informarse mejor sobre cómo prepararse para una redada.

2. SEPA QUÉ DOCUMENTACIÓN LLEVAR CONSIGO

- ✓ Lleve consigo una tarjeta con los datos de contacto de su abogado de inmigración o su representante sindical.
- ✓ Lleve consigo una tarjeta donde se indica su deseo de guardar silencio. Vea la tarjeta adjunta.



3. ELABORE UN PLAN PARA CUIDAR DE SU FAMILIA

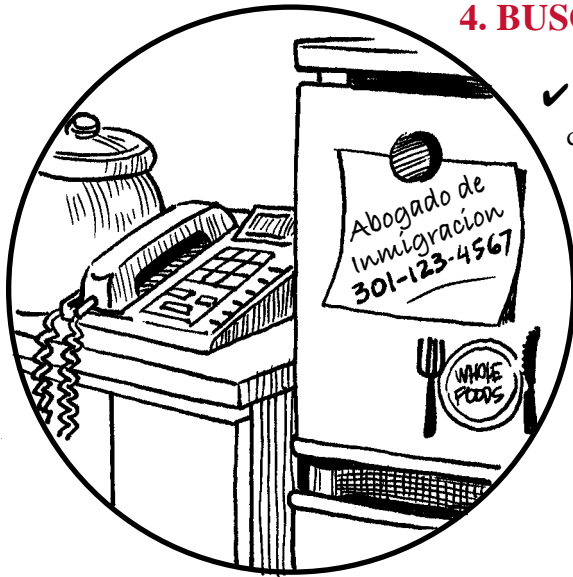


- ✓ Si tiene hijos o familiares mayores de edad, haga los preparativos necesarios para que un familiar o amigo se haga cargo de ellos en caso de su detención. Tenga consigo en todo momento los números telefónicos de este familiar o amigo y asegúrese que otros estén al tanto de su plan. Designe a personas de confianza para tomar decisiones en su lugar en caso de su detención. Ellas pueden ayudarlo a retirar dinero para gastos de deportación o de hipoteca.
- ✓ Puede firmar un poder que otorga la representación legal a otra persona si lo arrestan.

PREPARE UN PLAN DE EMERGENCIA

- ✓ Cerciórese que su familia tenga su número de inmigración (si lo tiene) y su nombre completo con fecha de nacimiento. Este número aparece en el permiso de trabajo o en la tarjeta de residencia. El número comienza con la letra A.
- ✓ Asegúrese que su familia sepa cómo comunicarse con usted si lo detienen. Los familiares deben contactarse con la oficina local de Inmigración y la División de Detenciones y Traslados de la Fiscalización Aduanera si no saben dónde está detenido. Deben preguntar por el agente supervisor de deportaciones e indicar el nombre completo y el número "A" de la persona detenida. Si no tiene la información de contacto de la sucursal local, comuníquese con la sede en Washington, DC al 202-305-2734.

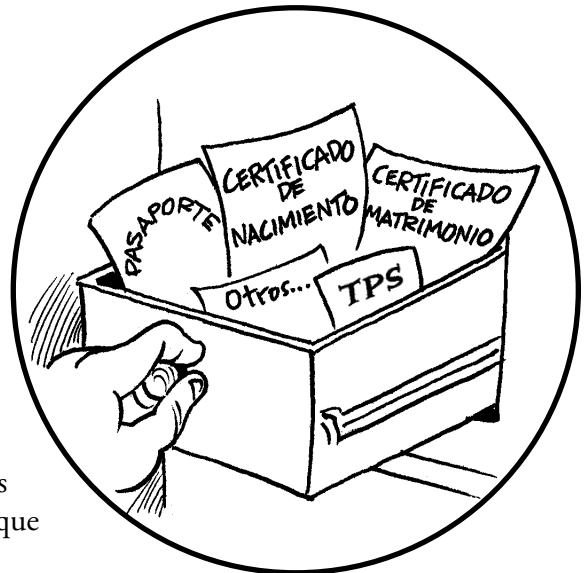
4. BUSQUE UN ABOGADO DE INMIGRACIÓN



- ✓ Busque un abogado de inmigración especializado en casos de deportación que pudiera representarlo si lo detienen. Memorice el nombre y número de su abogado de inmigración.
- ✓ Tenga al alcance del teléfono los nombres y números de varios buenos abogados de inmigración para que sus familiares tengan a quien llamar en caso de su detención.

5. MANTENGA UNA COPIA DE TODA DOCUMENTACIÓN DE INMIGRACIÓN

- ✓ Deje con un amigo o familiar de confianza una copia de toda documentación de inmigración que haya presentado a Inmigración. Junte, además, todos los documentos importantes tales como las actas de nacimiento, de matrimonio y los pasaportes. Guarde estos documentos en un lugar seguro y fácil de encontrar para que su familia pueda acceder fácilmente estos materiales.
- ✓ Haga una lista de los nombres y datos de contacto de todo abogado que le haya representado anteriormente.



TARJETA DEL DERECHO A GUARDAR SILENCIO:

Para ejercer su derecho a guardar silencio y solicitar un abogado, presente esta tarjeta a Inmigración o a la policía si lo arrestan.

¡CONOZCA SUS DERECHOS!

Si Inmigración o la policía lo detiene:

- ✓ Pase la tarjeta al agente y guarde silencio.
- ✓ La tarjeta explica que usted quiere ejercer su derecho a no contestar preguntas sin consultar con un abogado

ESTIMADOS SEÑORES:

Deseo ejercer mi derecho a guardar silencio y no contestar preguntas. Si me detienen, solicito comunicarme de inmediato con un abogado. Quisiera ejercer, además, mi derecho a no firmar nada sin consultar con mi abogado.

Gracias.

KNOW YOUR RIGHTS!

If you are detained by immigration or the police:

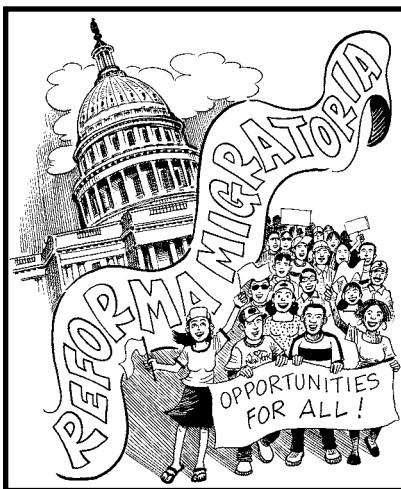
- ✓ Hand the card to the official, and remain silent.
- ✓ The card explains that you are exercising your right to refuse to answer any questions until you have consulted with a lawyer.

TO WHOM IT MAY CONCERN:

Please be informed that I am choosing to exercise my right to remain silent and the right to refuse to answer your questions. If I am detained, I request to contact an attorney immediately. I am also exercising my right to refuse to sign anything until I consult with my attorney.

Thank you.

ESTE FOLLETO SE PREPARÓ GRACIAS A LA COLABORACIÓN DE:



CASA de Maryland
Detention Watch Network
National Immigration Project of the National Lawyer's Guild

Un agradecimiento especial a Julie Dahlstrom del National Immigration Project y Juan Carlos Ruiz del National Community Capacity Consultants por sus contribuciones al contenido de este material.

Diseño y Mediación Pedagógica
Departamento de Educación y Liderazgo de CASA de Maryland

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Silver Spring, MD
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Guía de preparación para familias inmigrantes en el estado de Georgia

Reconocimientos

Agradecemos el aporte de las siguientes organizaciones para la elaboración de la guía:

Atlanta Legal Aid Society

Alston & Bird LLP

Consulado General de México en Atlanta

Eversheds Sutherland LLP

Kids in Need of Defense

Latino Community Fund Georgia

Ragsdale, Beals, Seigler, Patterson & Gray, LLP

Southern Poverty Law Center

Steptoe & Johnson LLP

El Proyecto Florence de Derechos del Inmigrante y el Refugiado

Y de cada una de las personas que dedicaron parte de su tiempo para revisar y hacer observaciones sobre los borradores del manual.

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- PASO 1:** Reúna y guarde en un lugar seguro toda su información personal y documentos importantes..... p. 4
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- PASO 3:** Asegúrese que esa persona acepta cuidar y ser responsable de sus hijos..... p. 9

B. Si lo detienen o lo deportan de Estados Unidos y quiere que sus hijos regresen con usted a su país de origen, haga lo siguiente con anticipación:

- Obtenga pasaportes para sus hijos (*si nacieron en los Estados Unidos o en otro país*)..... p. 11
- Haga los arreglos para poder viajar y otras consideraciones p. 13

C. Si lo detuvieron o lo deportaron de Estados Unidos y quiere que sus hijos se queden en Estados Unidos con alguien de su confianza, debe empezar a:

- Reunir los documentos legales para las escuelas de sus hijos, dándole permiso a la persona encargada para matricular a sus hijos en la escuela y para recoger y llevarlos a la escuela p. 15
- Formalizar un Poder (*un instrumento jurídico temporal mediante el cual se le permite a otra persona tomar decisiones por usted*) p. 16
- Custodia Temporal (*significa la transferencia a otra persona de la custodia legal sobre sus hijos, y hacer a esa persona "guardián" de sus hijos*)..... p. 17
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HAGA UN PLAN PARA SUS HIJOS EN CASO QUE USTED SEA DEPORTADO O DETENIDO

Si por alguna razón usted es separado de sus hijos, es importante tener un plan para asegurarse que ellos serán cuidados. Si usted desea que alguien de confianza cuide de sus hijos, esa persona necesitará contar con un permiso suyo para poder hacerse cargo de ellos y tomar decisiones mientras usted no está presente.

En esta guía encontrará información para ayudarlo(a) con este propósito. También están incluidos los diferentes formularios para su uso. Usted puede escoger el formulario que más se acerque a sus necesidades en el momento apropiado.

Si usted desea que una persona de confianza tenga la custodia legal de sus hijos, usted debe solicitarlo ante la corte. Para hacerlo, usted debe consultar con un abogado de familias.

Estos documentos lo ayudarán en caso de que usted tenga que estar separado de su familia por algún tiempo. Ellos no constituyen asesoramiento legal de lo que usted debe hacer.

!PROTÉJASE DE LOS NOTARIOS FALSOS!

Asegúrese de que el abogado que usted consulte tiene licencia profesional y la educación necesaria para ayudarle con su caso.

En muchos países de habla hispana, un “notario” es un abogado o una persona que ha estudiado leyes en la universidad. En los Estados Unidos, un “notary” o notario, es una persona con la única función de observar a las personas firmar documentos importantes. **NO ES UN ABOGADO Y NO PUEDE REPRESENTARLO (A)**. A un notario en los Estados Unidos no se le permite escribir documentos legales, ni darle a Usted consejo legal, a no ser que también sea abogado.

Usted puede verificar si su abogado tiene licencia para practicar leyes en el Estado de Georgia si llama al State Bar of Georgia al 404-527-8700 o al 800-334-6865.

No contrate a nadie que:

- No le da documentos por escrito.
- Le cobra por documentos que están en blanco.
- Le hace promesas porque le dice que “conoce a alguien” de Inmigración.
- Se hace pasar por abogado o especialista en inmigración.
- Le recomienda que debe mentir en los documentos.
- Le pide que firme documentos en blanco.
- Le cobra dinero para ponerle en “lista de espera” o “en la línea”. Recuerde: **No existe una lista. No existe una línea o fila de espera.**

Si usted piensa que su abogado es falso, puede llamar a cualquiera de los siguientes lugares:

American Bar Association Commission on Immigration / Comisión de la American Bar Association sobre Inmigración – (202) 662-1007. Para obtener más recursos para combatir fraude de notarios, visite la página: https://www.americanbar.org/groups/public_services/immigration/projects_initiatives/fightnotariofraud/victimresources.html

State Bar of Georgia/Barra Estatal de Georgia – Llame al programa de protección al consumidor: (404) 527-8759. Para informarse mejor, o para encontrar un formulario de quejas, sírvase visitar: <https://www.gabar.org/committeesprogramssections/programs/upl/>

Federal Trade Commission /Comision Federal de Comercio – en inglés o español (877-FTC-HELP). También puede visitar: www.stopnotariofraud.org

Immigration Court (Executive Office for Immigration Review)/Corte de Inmigración – Si usted es víctima de fraude de inmigración, puede presentar una queja formal directamente con la corte de inmigración a: <https://www.justice.gov/eoir/submit-complaint>

EN CASO DE QUE SEA DETENIDO

1 PASO 1

REUNA INFORMACIÓN IMPORTANTE

El primer paso para hacer su plan familiar es reunir la información importante, los números de teléfonos y sus documentos personales. Complete la tabla abajo para empezar.

Información Importante de los Menores

Mantenga esta información actualizada para que personas de su confianza puedan cuidar a sus hijos mientras usted está ausente.

Nombre de su Hijo(a)	
Fecha de Nacimiento	
Teléfono celular de su hijo	
Escuela	
Dirección de la Escuela	
Teléfono de la Escuela	
Nombre de su Maestro	
Grado	
Consejero en la Escuela	
Programa Post-Escolar	
Teléfono del Programa Post-Escolar	
Otro Campamento/Deporte/ Programa	
Teléfono de Otro Campamento/ Deporte/Programa	
Alergias	
Condiciones Médicas	
Medicamentos	

Teléfonos de Emergencia y Datos Importantes

Mantenga estos números en un solo lugar que todos en su familia conozcan.

Emergencias	
Emergencia Ahora	911
La Policia	
Los Bomberos	
Control de Envenenamiento	
Familia	
Madre/Padre/Guardián	
Teléfono de la Casa	
Teléfono Celular	
Dirección del Trabajo	
Teléfono del Trabajo	
Padre/ Madre/Guardián	
Teléfono de la Casa	
Teléfono Celular	
Dirección del Trabajo	
Teléfono del Trabajo	
Otros números de emergencia y cómo los conoce	
Teléfono Celular	
Guardián (persona confiable para cuidar a sus hijos)	
Teléfono de la Casa	
Teléfono Celular	
Correo Electrónico	
Dirección	
Dirección del Trabajo	
Teléfono del Trabajo	

Otros Contactos	
Doctor	
Teléfono	
Seguro de Salud	
Número de la Póliza	
Pediatra	
Teléfono	
Seguro Médico	
Número de la Póliza	
Dentista	
Teléfono	
Seguro Médico	
Número de la Poliza	
Iglesia o Centro Religioso	
Dirección	
Teléfono	
Embajada/Consulado (Oficina de su país de origen)	
Dirección	
Teléfono	
Abogado/Centro de Servicios Legales sin fines de lucro	
Dirección	
Teléfono	

Datos de Contacto para la Familia y/o Amigos en su País de Origen	
Nombre	
Teléfono	
Nombre	
Teléfono	
Nombre	
Teléfono	

Si le preocupa que lo detenga ICE y encuentren éstos números de teléfono en su persona, usted también puede establecer un plan de llamar a una persona que cuenta con estatus migratorio legal y que esa persona se encargue de llamar a todos los demás en su plan.

Reúna los Documentos Importantes

Asegúrese que cuenta con toda la información que pueda necesitar relacionada con sus hijos, tales como: actas de nacimiento, pasaportes, tarjetas de Seguro Social, documentos importantes de los doctores y escuelas (reporte de calificaciones, Planes de Educación Individualizados/Planes 504, informes de progreso), "Power of Attorney" ("Poder Legal" - documento donde nombra quien puede tomar decisiones por usted) y teléfonos de emergencia. Debe tener un archivo diferente para cada uno de sus hijos y debe guardarlos en un lugar seguro en su hogar. Asegúrese de hacer copias de toda la información.



PASO 2

DECIDA A QUIEN LE VA A CONFIAR EL CUIDADO DE SUS HIJOS (SE LE LLAMA “CAREGIVER” O GUARDIÁN)

Un guardián es alguien a quien usted le pide que cuide a sus hijos en el caso que usted no lo pueda hacer. La mayoría de los padres ya saben quién es esa persona, pero no siempre tienen los planes listos. Siga estos pasos para establecer un plan para el cuidado de sus hijos en caso que ICE lo detenga.

La persona que usted decida nombrar como guardián puede ser cualquier adulto responsable que usted elija, tal como su esposo o esposa, tía o tío, hermano o hermana, o cualquier otro miembro de la familia. El guardián también puede ser un padrino, amigo/amiga, o vecino/vecina. Si usted tiene más de un hijo, puede escoger diferentes guardianes para cada hijo, o puede dejarlos todos juntos bajo el cuidado de una persona. Si le es posible, escoja un guardián que cuente con estatus migratorio legal.

Usted debe escoger un guardián que pueda recoger a sus hijos enseguida que lo detengan a usted.

Si después de intentar encontrar un pariente que tome la custodia de sus hijos, no hay nadie disponible para recogerlos de inmediato, el Departamento de Servicios para Familias y Niños puede presentar un caso en su contra. Por esta razón es importante hacer un plan por adelantado.



3

PASO 3

ASEGÚRESE QUE EL GUARDIAN QUE ESCOJA ESTÁ DE ACUERDO EN CUIDAR A SUS HIJOS.

Después de que usted decida quién será el guardián de sus hijos, hable con esta persona. Hay muchas cosas importantes que discutir y usted querrá asegurarse que todos están de acuerdo con el plan. Asegúrese que el guardián entienda que es posible que sus hijos estarán viviendo con él o ella por un largo tiempo. Hable con el guardián para asegurarse que cuenta con dinero suficiente para cuidar a sus hijos y que tiene suficiente espacio en su hogar.

Piense en estas preguntas para cuando hable con el guardián de su elección:

- **¿Por cuánto tiempo le será posible cuidar a sus hijos?**

No es posible saber por cuanto tiempo usted va a estar separado de sus hijos. Pueden ser meses o hasta años. Si es deportado, puede ser por mucho tiempo. Desafortunadamente, muchos menores terminan en hogares sustitutos porque los guardianes pensaban que tendrían a los menores por unas semanas y les resulta imposible cuidarlos más tiempo. Asegúrese que el guardián que usted escoja está listo y le es posible cuidar de sus hijos por un largo tiempo en caso sea necesario.

- **¿Cuánto costará cuidar a sus hijos?**

El guardián que usted elija tendrá que atender a todas las necesidades de sus hijos. Necesitarán comida, un hogar, transporte, visitas al doctor, así como ropa y libros. Es posible que el guardián pueda obtener asistencia pública (dinero o seguro médico por parte del gobierno). En caso que no pueda, ¿le será posible al guardián correr con los gastos de sus hijos? ¿Puede usted guardar dinero para ayudar en caso que lo detenga ICE? ¿Cuenta con amigos o familiares que puedan ayudar al guardián a costear los gastos de sus hijos?

- **¿Quién más vive en esa casa?**

¿Conoce y confía usted en todos los que viven en la casa del guardián? Usted debe asegurarse que está a gusto y confía en todos los que estarán en contacto directo con sus hijos. Si hay alguien en la casa que ha estado preso, o de quien existen reportes de haber abusado de un menor, las autoridades no permitirán que sus hijos se queden en esa casa. Y, si alguien llama al Departamento de Servicios para Familias y Menores en relación con la seguridad de sus hijos, un juez puede ponerlos con familias sustitutas en hogares de tránsito para que el estado se ocupe de ellos.



- **¿Habrá adultos para cuidar a los menores?**

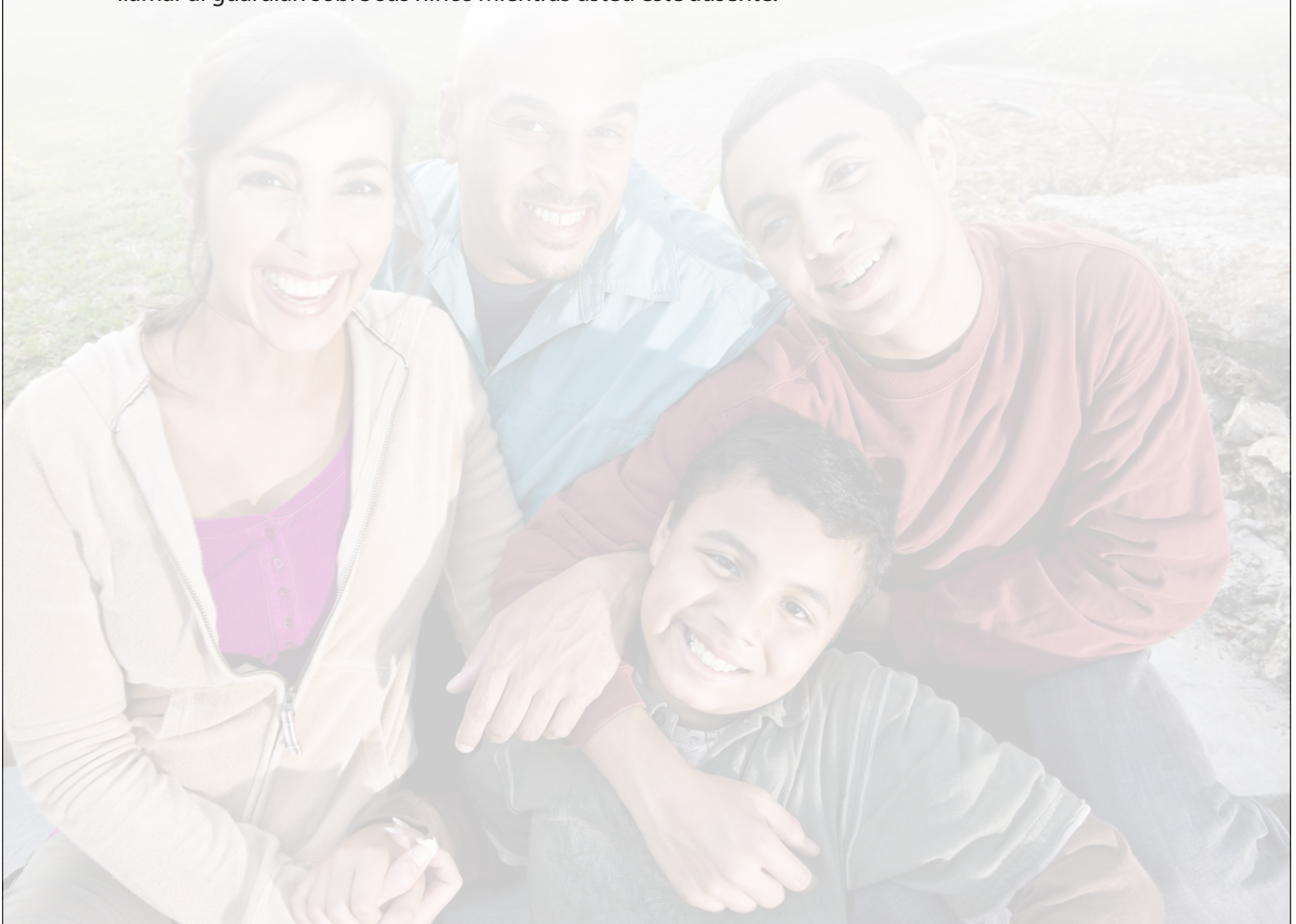
Usted necesita asegurarse que sus hijos estarán atendidos en todo momento para que estén seguros y saludables. Infórmese de quien estará al tanto de sus hijos en la casa y si van a ir a guardería infantil cuando no estén en la casa. Asegúrese que la casa del guardián es adecuada para todos sus hijos.

- **¿El guardián sabe de algún cuidado especial que sus hijos necesitan (como medicinas o visitas al doctor)?**

Déle al guardián el teléfono, la dirección, y el nombre del doctor de sus hijos y las tarjetas de seguro médico o documentos pertinentes. Si alguno de sus hijos toma medicinas, dígame al guardián donde están guardadas las medicinas y como pueden obtener más así como detallar cualquier cuidado especial que sus hijos puedan necesitar. Proporciónese también una copia del Plan de Educación Individualizado/Plan 504 de la escuela.

- **¿El guardián sabe a qué colegios van sus hijos?**

Usted debe asegurarse de que el guardián sepa a cuales escuelas van sus hijos en caso de que ellos tengan que recogerlos en una emergencia. Es importante que también dé una copia por escrito a la escuela de sus niños diciendo que se le es permitido al guardián recoger sus niños de la escuela y que la escuela debe llamar al guardián sobre sus niños mientras usted esté ausente.



SI LO DETIENEN O LO DEPORTAN DE ESTADOS UNIDOS Y QUIERE QUE SUS HIJOS REGRESEN A SU PAÍS DE ORIGEN CON USTED

Obtenga pasaportes para sus hijos

Si su hijo es menor de 16 años y ciudadano americano, usualmente los dos padres deben aplicar para el pasaporte.

Si uno de los padres no puede ir, ese padre le debe dar al otro permiso llenando el formulario "Statement of Consent" (forma DS-3053). Ese padre le debe mostrar un documento de identificación a un notario para que el notario le ponga el sello notarial. Después, entregue la aplicación para el pasaporte (Forma DS-11) con la Forma DS-3053, junto con una copia de la identificación del otro padre (la que tiene el sello notarial).

Un padre puede aplicar para el pasaporte de su hijo sin consentimiento del otro padre si:

- Un padre puede probar que tiene custodia exclusiva (formulario legal donde dice que solamente un padre tiene la custodia), O
- Puede demostrar que hay una emergencia o una razón especial por la que el otro padre no puede firmar los documentos (no se puede localizar al otro padre o ha sido deportado). Si ese es el caso, entonces uno de los padres puede completar el formulario "Statement of Exigent/Special Family Circumstances" (Forma DS-5525). El Departamento de Estado vera la explicación y el por qué el otro padre no puede dar el permiso, y tomará una decisión.

Para determinar dónde debe solicitar un pasaporte americano, sírvase visitar:

<https://travel.state.gov/content/passports/en/passports/information/where-to-apply.html>

Debe llevar los siguientes documentos:

1. Documentos para comprobar la ciudadanía de su hijo(a) que puede ser uno de los siguientes:

- Pasaporte intacto y valido de Estados Unidos, (puede estar vencido)
- Acta de nacimiento en los Estados Unidos
- Reporte Consular de Nacimiento en el Extranjero (también llamado evidencia de ciudadanía)
- Certificado de Ciudadanía

2. Documentos donde se muestra que usted es padre del hijo para el que quiere el pasaporte. Puede usar uno de los siguientes:

- Acta de nacimiento de Estados Unidos (también comprobante de ciudadanía de E.E.U.U.)
- Reporte Consular de E.E.U.U de Nacimiento en el Extranjero (también evidencia de ciudadanía de E.E.U.U.)
- Acta de Nacimiento de otro país
- Comprobante certificado de Adopción
- Certificado de Divorcio / Custodia
- Para Guardianes o Guardianes Temporales, Orden Judicial nombrando al guardián

3. Si tiene la custodia exclusiva de su hijo/s, se necesita mostrar uno de estos documentos:

- Orden judicial completa otorgándole custodia exclusiva del menor

- Orden judicial completa permitiéndole específicamente aplicar para el pasaporte del menor
- Copia certificada de acta de nacimiento del menor mostrándolo como único padre
- Copia certificada del decreto de adopción mostrándolo como único padre
- Copia certificada de la declaración judicial de incapacidad del padre/madre que no está aplicando
- Copia certificada del certificado de defunción del padre/madre que no está aplicando
- Copia de la Ley de Georgia O.C.G.A. §19-7-25¹

4. Los padres deben mostrar uno de estos documentos comprobando su identidad - y también traer una copia del mismo.

- Licencia de conducir válida del mismo estado
- Pasaporte de Estados Unidos válido o vencido, intacto
- Certificado de Ciudadanía o Naturalización
- Número de empleado del gobierno (de la ciudad, condado, estado, o federal)
- Número de empleado o de dependiente de militar de Estados Unidos
- Pasaporte extranjero válido
- Matrícula Consular (Identificación Consular) que se usa por un padre extranjero de un menor que es ciudadano de Estados Unidos
- Si el padre o guardián no tiene ninguna de las credenciales o documentos especificados en la lista, debe visitar el siguiente sitio de web para más alternativas: <https://travel.state.gov/content/passports/en/passports/information/identification.html>

5. Los padres deben traer una foto del menor de 2x2 pulgadas. Asegúrese de poner atención a los requisitos de cómo debe lucir con exactitud:

- Impresa en papel de calidad fotográfica
- El área de la cabeza debe medir entre 1 a 1 3/8 pulgadas (entre 25 a 35 mm) desde abajo de la barbilla hasta la parte superior de la cabeza
- Tomada dentro de un plazo de los últimos 6 meses para reflejar su aspecto actual
- Tomada delante de un fondo completamente blanco o color hueso
- Tomada con la cara completa mirando directamente a la cámara
- Con una expresión facial neutral y los dos ojos abiertos
- Tomada con la ropa que normalmente usa a diario
- No debe usar uniforme en la foto, excepto vestimenta religiosa que usa a diario
- No use sombrero ni se cubra la cabeza de manera que no se vea el pelo, a no ser que lo usa a diario por motivos religiosos. Su cara debe estar visible completamente, y lo que tenga en la cabeza no debe darle sombra en su cara
- No debe tener audífonos, dispositivos inalámbricos que le dejan las manos libres ni otros objetos similares en su foto
- Si normalmente lleva lentes con receta médica, o aparatos auditivos, o algún dispositivo similar, lo puede usar para su foto

¹ Bajo las leyes de Georgia, solo la madre del menor nacido fuera de matrimonio tiene la custodia del menor, O.C.G.A. §19-7-25. El padre del menor no tiene derechos legales respecto al menor a no ser que se case con la madre o que obtenga una orden judicial "legitimando" al menor (declarando que es el padre legal del menor) y una orden específica para la custodia y derechos de visita, O.C.G.A.

§19-7-22. Debido a que no todos los estados siguen esta ley, es posible que tenga que completar la Forma DS-5525, declaración de circunstancias familiares especiales para explicar la razón por la cual no necesita consentimiento del padre.

- No debe usar lentes oscuros o lentes sin receta médica con cristal oscuro a no ser que lo deba llevar por razones médicas (es posible que se le pida el certificado médico)
- Algunos centros para expedición de pasaportes ofrecen servicios de fotógrafo por un cargo adicional. Muchas tiendas CVS también ofrecen estos servicios por un cargo adicional.

NO adjunte su foto a los otros documentos.

6. Traiga dinero para pagar el cargo por su pasaporte.

El Pasaporte cuesta \$105. La Tarjeta Pasaporte cuesta \$40 y el Pasaporte y la Tarjeta Pasaporte cuestan \$120. Algunos centros no aceptan tarjetas de crédito ni cheques; asegúrese que lleva dinero en efectivo.

Si uno de los padres no cuenta con el consentimiento del otro padre para aplicar y no tiene la custodia exclusiva, debe traer y/o llenar todos los siguientes documentos:

- Llenar la "Aplicación para Pasaporte de Estados Unidos" con los datos completos (Forma DS-11).
- Llenar las Secciones 1 a la 8 de la declaración "Statement of Exigent/Special Family Circumstances" (Forma DS-5525). Si no sabe la respuesta de alguna pregunta, puede escribir "I don't know."
- Si el otro padre no está en la vida del menor, en la Sección 7 describa TODOS sus esfuerzos para tratar de localizar al padre. Debe ponerse en contacto con un mínimo de 2 personas diferentes, incluyendo amigos, familiares, antiguos empleadores o arrendadores para pedirles la dirección actual del padre que no está aplicando y escribir exactamente lo que esa persona le ha dicho. Debe buscar en internet y directorios telefónicos y escribir exactamente lo que encuentra. Si necesita espacio adicional para describir sus esfuerzos para ponerse en contacto con el padre que no está aplicando, siga en un papel separado. Entendemos que puede ser difícil encontrar al padre que no está aplicando, y es probable que no lo encuentre, pero es muy importante demostrar todos los esfuerzo que hizo para lograr encontrarlo(a). Si el Depto. de Estado no está convencido que hizo su mayor esfuerzo para encontrarlo(a), es probable que le nieguen su aplicación.
- Si usted vive ahora en Georgia, nunca estuvo casada/o con el padre de su hijo/a, y el padre nunca presento un reclamo para hacer legítimo al menor, entonces debe escribir lo siguiente en la Sección 8: "Tengo la custodia exclusiva de mi hijo/a (el nombre del menor) de acuerdo a las leyes de Georgia debido a que el menor nació fuera de matrimonio y el padre nunca le dio su nombre al menor. Anexa está la copia de O.C.G.A. § 19-7-25 y el acta de nacimiento de mi hijo/a." Si aplica, puede agregar: "Además, he buscado al padre de mi hijo/a para tratar de obtener su consentimiento pero no he podido encontrarlo."
- Describa cualquier otra circunstancia especial o de emergencia que pueda requerir el viaje en la Sección 8.
- Anexe otra evidencia relevante tal como la orden de custodia, certificado de defunción, orden de encarcelamiento, orden de deportación, orden de protección temporal.
- Haga copia de todo lo que va a presentar al Departamento de Estado y mantenga todos esos documentos juntos para sus archivos de documentación.
- Envié la aplicación original para el Pasaporte, Expedición de Pasaporte de Estados Unidos para el Menor, el original del formulario "Statement of Exigent/Family Circumstances", y cualquier otra evidencia adicional como la copia de "Sole Custody Statute" (O.C.G.A. § 19-7-25). Anexe una copia del acta de nacimiento del menor – no envíe el original. Recuerde: mantenga copia de todos los documentos en un lugar seguro.

Si ninguno de los padres está presente (si ambos han sido deportados o están fuera del país), entonces una persona de confianza puede aplicar para el pasaporte del menor. Esa persona debe contar con una carta de ambos padres. La carta debe decir que los padres le dan permiso a esa persona para solicitar el pasaporte del menor, y debe contar con sello notarial. También debe incluir copia de identificación de ambos padres. Cuando la carta es solamente de uno de los padres, la persona de confianza también debe llevar copia de documentos legales indicando la custodia exclusiva.

Si la aplicación se le niega al menor, debe ponerse en contacto con un abogado enseguida. Usted puede aplicar para una apelación y tratar de nuevo, pero debe hacerlo inmediatamente. Su abogado le puede recomendar que aplique para la custodia exclusiva, de ser necesario. Recuerde guardar copias de todos los documentos que usted le entrega al Departamento de Estado así como mantener todas las cartas y documentos que reciba de ellos.

Si su hijo/a no nació en los Estados Unidos de América:

Usted deberá llamar a la embajada o consulado del país donde nació su hijo/a y preguntarles sobre los documentos necesarios para obtener el pasaporte de su hijo/a. La embajada o consulado debería poder ayudarla(o) e informarle si es posible que su hijo/a tenga la ciudadanía de su país de origen además de la de Estados Unidos.

Otras Consideraciones de Viaje

Si desea que el guardián que usted escogió viaje con sus hijos o tramite sus viajes, usted debe mantener la partida de nacimiento de su hijo/a, pasaporte, y copia de cualquier otro documento legal en un lugar seguro que el guardián conozca. Aunque sus hijos tengan sus pasaportes, es difícil viajar con un menor que no viaja con sus padres porque pueden surgir inconvenientes. Si su hijo/a viaja sin sus padres, un oficial de ICE o personal de la aerolínea le puede pedir la carta de consentimiento (una carta indicando que usted está de acuerdo que esta persona viaje con sus hijos). Es muy importante que hable con la aerolínea y el consulado/la embajada de su país de origen para tener claro los documentos necesarios para que su hijo/a pueda viajar fuera de los Estados Unidos. La oficina de Aduanas y Protección de Fronteras (U.S. Customs and Border Protection) cuenta con un sitio de web con mucha información útil que le recomendamos lea:

<http://www.cbp.gov/travel/international-visitors/know-before-you-go>

y

https://help.cbp.gov/app/answers/detail/a_id/449/kw/449.

Ver Ejemplo de Carta de Consentimiento para Viaje Internacional en el Apéndice de Formularios

SI ESTA DETENIDO O ES DEPORTADO Y QUIERE QUE SUS HIJOS PERMANEZCAN CON UN GUARDIAN EN ESTADOS UNIDOS

Educación/Matrícula en la Escuela

Los menores tienen el derecho de permanecer en la misma escuela cuando tienen que cambiar de hogar por la pérdida de la casa, problemas económicos u otro motivo similar. Eso quiere decir que si lo detiene ICE y sus hijos tienen que vivir con un guardián que no vive en su distrito escolar, sus hijos pueden seguir asistiendo clases en la escuela original. La escuela debe proveer transporte. Si la escuela dice al guardián que los niños no puede seguir asistiendo a esta escuela, usted o el guardián puede disputar esta decisión.

Por otra parte, si usted y el cuidador de los niños deciden que sería mejor que los niños asistieran a una escuela en el distrito del cuidador, se debería permitir que el cuidador inscriba a los niños en esa escuela, incluso si el cuidador no tiene custodia u orden de custodia.

Declaración jurada no-paternal.

El distrito escolar puede requerir que el cuidador complete una **Declaración Jurídica No-Parental**. En esta guía encontrará ejemplos de las declaraciones juradas no-parentales usadas en las Escuelas Públicas de Atlanta, las Escuelas del Condado de Cobb y las Escuelas del Condado de Gwinnett. Si vive en otro lugar, pida al distrito escolar el formulario, pero recuerde que el distrito escolar **no puede** requerir papeles de custodia o tutela.

Declaración jurada del cuidador de parentesco

Además, el distrito escolar puede pedirle a un cuidador que firme una Declaración jurada de cuidador de parentesco. La Declaración Jurada de Cuidador de Parentesco requiere que un cuidador liste una licencia de conducir o un número de identificación, y algunos cuidadores pueden no tener esta información. Sin embargo, la Declaración Jurídica de Cuidador de Parentesco no está obligada a inscribir a un niño en escuela, aunque permitirá a un cuidador dar su consentimiento a servicios que usualmente requieren el consentimiento de los padres. Estos servicios son:

1. Servicios educacionales;
2. Servicios médico necesarios para inscribirse en la escuela (por ejemplo, vacunas/ inmunizaciones); y
3. Actividades curriculares o extracurriculares

Matrícula provisional

Si el distrito escolar tiene alguna pregunta sobre la elegibilidad de un niño para inscribirse, el distrito escolar debe inscribir al niño provisionalmente por 30 días para permitir que el cuidador resuelva el problema sin que el niño se pierda la escuela.

Bajo la ley de Georgia, una persona que cuida a un niño en su hogar es requerida inscribir a ese niño en la escuela. Si usted o el cuidador tienen algún problema al inscribir a sus hijos en la escuela, es importante ponerse en contacto con un abogado inmediatamente.

Ver Declaraciones Juradas de la Escuela en el Apéndice de Formas

PODER LEGAL

(Este documento es un acuerdo entre usted y el guardián en caso que usted sea detenido o deportado. El Poder Legal le permite al guardián tomar decisiones por sus hijos mientras usted no está presente.)

El Poder Legal le permite al guardián tomar decisiones por sus hijos temporalmente sin tener que ir a la corte. Si usted firma un poder legal, no significa que el guardián tiene todos los derechos de los padres, solamente le permite tomar decisiones por el menor en caso que usted no pueda por estar detenido o deportado. Usted aún tiene sus derechos como padre/madre de su hijo/a. Usted puede decidir si quiere que el guardián tome decisiones referentes a la escuela, visitas al médico y/o viajes de sus hijos.

En Georgia, el poder legal para cuidar a un menor solamente se le puede dar a un abuelo, padrastro- abuelo, bisabuelo o padrastro-bisabuelo. Sin embargo, si usted desea que otra persona sea el guardián de sus hijos, no será válido en el estado de Georgia. Entretanto, si usted quiere que otra persona cuide a sus hijos y no quiere tener que ir a la corte, usted todavía puede escribir un poder legal porque muchos lugares pueden aceptarlo.

Usted debe asegurarse que el guardián que escoge está dispuesto a ocuparse de sus hijos incluso si por las circunstancias se trata de un largo tiempo. Asegúrese que la persona escogida sabe que si decide que ya no le es posible ser guardián, es necesario que se lo diga a usted de.

Ambos padres deben firmar el poder legal. Sin embargo, un padre que tiene la custodia exclusiva puede completar el poder legal sin que el otro padre lo firme. Si usted es el padre con la custodia exclusiva, debe informarle al otro padre si desea firmar el poder legal antes de usted firmarlo. Le debe enviar una carta por correo certificado al otro padre y pedirle acuse de recibo por escrito. Es muy importante recordar que el otro padre podría decir que no al poder legal que usted escogió y podría solicitar a la corte un cambio en la custodia del menor.

El formulario del Poder Legal para un abuelo y el formulario de revocación (en caso que usted cambie de opinión acerca del poder legal) están incluidos aquí. También incluimos un formulario que puede usar si usted quiere darle el poder legal a otra persona que no sea un abuelo. Pero recuerde, el formulario técnicamente no es válido en Georgia; así que, si no funciona para sus necesidades, debe consultar con un abogado acerca de sus opciones.

Usted debe llenar el Poder Legal y debe dárselo al guardián, a la escuela, y también al doctor de sus hijos. Asegúrese de hacer una copia para usted.

Cuando usted quiera cambiar el poder legal para que el guardián no tome más decisiones por su hijo, usted debe llenar el formulario de revocación y entregárselo al guardián. Le recomendamos enviar el formulario de revocación al guardián por correo certificado y pedirle confirmación por escrito que el documento fue recibido. Entregue copias del formulario de revocación a la escuela y al doctor de su hijo y a cualquier otra persona que pueda tener copia del poder legal.

Ver Formularios de Poder Legal en el Apéndice de Formularios.

Si está Detenido o es Deportado y desea que sus hijos permanezcan en los Estados Unidos con un guardián

Custodia Temporal

Un guardián temporal es una persona que usted elige para que cuide a su hijo/a mientras usted renuncia temporalmente a sus derechos como padre (solo por un corto tiempo). Un guardián temporal puede ser cualquier adulto que esté cuidando a su hijo/a, siempre y cuando el adulto no esté bajo el cuidado del estado o de otra persona. El guardián temporal cuidará a sus hijos tal como usted lo haría. Podrá tomar decisiones acerca del cuidado de la salud de su hijo/a, a que escuela va, y pagará por cualquier cosa que el menor necesite. Se mantendrá "en lugar suyo" como padre/madre.

El guardián estará amparado por una orden judicial para hacer todo lo que está a su alcance para ocuparse de su hijo/a y proporcionarle todo lo que necesite. Usted está en su derecho de escoger al guardián temporal. La corte también puede considerar los deseos del menor. En todo caso, la corte toma la decisión final. A veces, el juez de la corte testamentaria elige a otra persona, pero esto no sucede a menudo. Es posible que la corte le pida a la persona que está tratando de ser guardián temporal que se someta a un chequeo de antecedentes penales. Algunas cortes han decidido que el guardián debe ser ciudadano americano, residente permanente, o contar con prueba de estatus permanente en los Estados Unidos.

Para obtener un guardián temporal para sus hijos, un adulto que ya esté cuidando a sus hijos debe presentar una solicitud ante la corte testamentaria en el condado donde el guardián vive. Si el guardián no vive en Georgia, la solicitud se puede presentar en el condado donde está el menor, pero el menor debe ir a la corte con el guardián. Debemos aclarar que una persona NO PUEDE tener custodia temporal de un menor si ese menor no está viviendo y está siendo atendido por esa misma persona.

Para que una custodia temporal funcione, usted tendrá que renunciar a sus derechos como padre/ madre. Mientras la otra persona tiene custodia temporal de sus hijos la otra persona tomará todas las decisiones por los menores, incluyendo por ejemplo, cuándo usted los puede ir a visitar. Una custodia temporal no le quita los derechos paternos permanentemente, pero sus derechos quedan "suspendidos" hasta que termine la custodia temporal.

Usted todavía es responsable de pagar la manutención de su hijo/a, y el guardián también pagará para mantener al menor saludable y seguro. En caso que ni usted ni nadie más pueda ayudar a pagar la manutención de su hijo/a, el guardián temporal puede asumir la manutención del menor, lo cual tendría que hacer para poder incluir al menor en su seguro de salud. Incluso en esa circunstancia, usted tiene la responsabilidad de mantener a su hijo(a) monetariamente.

IMPORTANTE: Si usted no provee ayuda a sus hijos, ya sea apoyo financiero o emocional, puede perder el derecho sobre sus hijos. Por favor, le rogamos que a pesar de las circunstancias tan difíciles por las que esté pasando, mantenga contacto con sus hijos y haga todo lo posible para proveer por sus hijos, aunque estén separados.

Cuando la corte decida quién es el guardián temporal, esa orden quedará en efecto hasta que:

- el menor cumpla los 18 años de edad
- el menor sea adoptado
- el menor sea emancipado por la corte (de edad suficiente para valerse por si mismo)
- el menor muera
- el guardián temporal muera
- se entreguen cartas de tutela al guardián permanente o se emita una orden judicial terminando la custodia temporal.

Usted puede pedirle a la corte en cualquier momento que termine la custodia temporal. Cuando presente la petición para terminar la custodia temporal, la corte le enviara una notificación al guardián temporal. Si el guardián temporal está de acuerdo, la corte puede terminar la custodia sin una audiencia. Pero si el guardián temporal se niega a aceptar la petición dentro de un término de 10 días y desea seguir como guardián temporal del menor, la corte tendrá una audiencia para decidir lo que es mejor para el menor. Mientras más tiempo estén los menores bajo supervisión y cuidado del guardián, mayor influencia puede tener esta circunstancia en la decisión de la corte.

Si no desea involucrar a la corte, llene los formularios de “Power of Attorney for the Care of a Minor Child”. Por favor, tenga en cuenta que en ciertas situaciones (tal como si el guardián quiere incluir al menor en su seguro), solo una orden judicial de custodia funcionará.

Los formularios que deben completarse para poder presentar la Petición Cartas Temporales de Tutoría de Menores “Petition for Temporary Letters of Guardianship of a Minor” se puede encontrar en <http://gaprobate.gov/content/standard-forms> o puede visitar la oficina de proceso judicial de su condado. Cada corte puede tener formularios adicionales o complementarios que usted debe llenar, pregunte para asegurarse que tiene toda la documentación pertinente completa.

Este formulario contiene varias páginas que los padres de los menores deben firmar ante notario y deben ser notarizadas (firmadas por un notario), y un documento adicional que también debe ser notarizado y firmado por cualquier menor con más de 14 años de edad. Los documentos muestran a la corte que los padres y el menor (si tiene más de 14 años de edad) conocen y aprueban al guardián temporal escogido. Por favor note que el formulario no se puede presentar ante la corte hasta que la persona que usted ha escogido para ser el guardián temporal asuma la custodia del menor. *Esto significa que algunos documentos se pueden llenar en cualquier momento pero usted debe hacer planes para firmar el formulario y el resto de los documentos después de no estar presente, ya sea detenido o deportado por ICE.*

Lo que el guardián temporal NO PUEDE HACER:

El guardián temporal cuidará al menor todos los días, pero el guardián tiene límites en lo que puede hacer, por ejemplo: el guardián no puede combinar dinero destinado para el menor con el suyo propio, ni deshacerse de dinero o bienes del menor sin que la corte lo sepa y dé su aprobación. Si el menor piensa que el guardián le está negando sus derechos o no los cuida debidamente, el menor puede presentar una demanda ante el tribunal testamentario.

Los siguientes lugares, son excelentes recursos para hacer preguntas relacionadas con el tema de custodia: Atlanta Legal Aid y Georgia Legal Services Program.

Si usted no califica para recibir estos servicios gratuitamente, entonces puede hablar con cualquier abogado de familias que usted elija.

Como escoger al Guardián

Si usted piensa que lo mejor para su hijo(a) es asignar un guardián temporal, el primer paso es decidir quién será. El guardián que usted escoja para sus hijos debe ser alguien confiable - recuerde que estará actuando en su lugar como padre/madre de sus hijos. El guardián debe ser alguien que tenga la capacidad de ocuparse de sus hijos de inmediato en caso que usted sea detenido o deportado.

Considere las siguientes opciones:

El Guardián PUEDE Ser:

- Un familiar
- Un amigo
- Un padrino
- Un vecino

Un Guardián NO PUEDE Ser:

- Un menor (alguien que tiene menos de 18 años de edad)
- Una persona incapacitada o incompetente (alguien que no pueda cuidarse de si mismo(a) sin la ayuda de un guardián debido a una seria discapacidad física, intelectual o mental, incluyendo una enfermedad mental severa.)
- Alguien que se niega a servir como guardián o que tiene otras responsabilidades que no le dejarían servir como guardián

El Guardián Tendrá el Poder de:

- Estar a cargo de las pertenencias de sus hijos (ropa, juguetes, libros)
- Decidir donde vivirán sus hijos
- Entablar demandas en nombre de sus hijos
- Aprobar tratamiento médico para sus hijos

A Guardian Must:

- Respetar los derechos de sus hijos
- Ocuparse del apoyo, cuidado, educación, y de la salud de sus hijos
- Ocuparse de las pertenencias de sus hijos (ropa, juguetes, libros)
- Ahorrar para las futuras necesidades de sus hijos con cualquier dinero extra que tenga
- Dentro de 60 días después de ser nombrado guardián y dentro de 60 días después de cada aniversario del nombramiento debe presentar al tribunal un reporte de su situación personal en relación con el menor, incluyendo:
 - Descripción de las condiciones del menor, cambios desde el último reporte, y las necesidades del menor;
 - Todas las direcciones del menor durante el periodo del informe y las condiciones de vida del menor en cada una de las direcciones; y
 - Recomendaciones referentes a cualquier alteración en la orden de tutela;
- Mantener informada a la corte del domicilio actual del guardián
- Actuar de inmediato para terminar la custodia cuando el menor muera, cumpla 18 años, sea adoptado, o emancipado

Preguntas importantes que debe hacerse para decidir sobre un guardián:

1. ¿Quién es la persona en qué está pensando?
2. ¿Dónde vive? ¿Es un lugar seguro para sus hijos? ¿Podrán ir a su escuela o al doctor desde ese lugar?
3. ¿Quién más vive con ellos? ¿Se siente Ud. tranquilo con estas personas? ¿También se siente tranquilo si sus hijos viven con o cerca de ellos?
4. Si Ud. queda detenido, ¿les sería posible a ellos venir a recoger a sus hijos de inmediato?
5. ¿Pueden mantener y cuidar a sus hijos? ¿Lo podrían seguir haciendo por un largo tiempo si fuera necesario?

6. Si Ud. queda detenido durante mucho tiempo, ¿su condición financiera les permitiría continuar manteniendo a sus hijos? ¿Tiene Ud. dinero que pueda enviarles para ayudar a que se ocupen de sus hijos? ¿Confía en ellos para que manejen su dinero? Recuerde que, a no ser que la persona que Ud. elija asuma la responsabilidad de pagar por el cuidado de sus hijos, seguirá siendo responsabilidad suya costear la manutención de sus hijos.

7. ¿Les pueden proporcionar suficiente supervisión a sus hijos? (¿habrá alguien que cuide a sus hijos en todo momento)?

8. ¿Confía en que tomen decisiones importantes relacionadas con la salud y el cuidado de sus hijos? ¿Les hablarían de esas decisiones a otros?

9. ¿Les cuidarían las pertenencias de sus hijos (ropa, libros, juguetes)?

10. ¿Son capaces de ahorrar y manejar dinero para cualquier necesidad futura de sus hijos?

Asegúrese que el Guardián que usted escoge Sepa:

- Que usted quiere que se ocupe de sus hijos en caso de que usted sea detenido, y que él/ella está de acuerdo en hacerlo.
- Que deberá recoger a sus hijos enseguida si a usted lo detienen. En el caso que a sus hijos se los llevan bajo la custodia de DFCS, el guardián que haya elegido debe ponerse en contacto con DFCS inmediatamente para demostrar que él/ella debe ser el guardián apropiado para sus hijos.
- Donde sus hijos van a la escuela, y cuáles son sus necesidades médicas.
- Donde están guardados los documentos importantes de sus hijos (copia del acta de nacimiento, poder legal de custodia, información de identificación, la escuela, su historial médico) así como cualquier otro contacto de emergencia o información de importancia. Puede considerar darle al posible guardián de sus hijos sus propias copias de estos documentos.

Si, después de contestar todas las preguntas anteriores, usted tiene cualquier duda relacionada con la persona que usted ha elegido para ser el posible guardián, es posible que quiera re- considerar su decisión. En este caso, recuerde que tiene que asegurarse que el nuevo guardián de su elección le confirme que está listo, dispuesto, y en condiciones de ocuparse de sus hijos, y que lo puede hacer aunque usted este detenido o no le sea posible regresar para recoger a sus hijos por un largo tiempo.

Apéndice de Formularios

Los siguientes formularios se incluyen con fines informativos y sólo deben ser ejecutados después de consultar con un abogado. Este manual no debe reemplazar el consejo individualizado de un abogado de confianza.

SAMPLE LETTER OF CONSENT FOR INTERNATIONAL TRAVEL

To Whom It May Concern:

We/I, _____, are the
_____ (relationship to child) of _____

(Child’s Full Name), who’s date of birth is _____.

We/I acknowledge that our son/daughter is traveling outside the country with
_____ (name of traveling companion), with our permission.

On this trip, the child will be traveling to _____ on the
following dates _____ (date of departure) to
_____ (date of return).

The means of transportation that will be used is as follows: _____

(List airline and flight numbers, cruise lines, etc., or state “by automobile”).

Upon arrival the child will be residing at the following address: _____

Should there be any questions, please contact _____ at

(address and phone number(s)).

Signature: _____ Date: _____

Full Name: _____

Signature: _____ Date: _____

Full Name: _____

SWORN AND AFFIRMED before me on _____ day of _____, 20 _____.

_____, NOTARY PUBLIC.

KINSHIP CAREGIVER'S AFFIDAVIT

Use of this affidavit is authorized by O.C.G.A. Section 20-1-16.

INSTRUCTIONS: Please print clearly.

I hereby certify that the child named below lives in my home and I am 18 years of age or older.

1. Name of child: _____

2. Child's date of birth: _____

3. My full name (kinship caregiver giving authorization): _____

4. My home address: _____

5. I am a kinship caregiver.

6. I have assumed kinship caregiver status because of one or more of the following circumstances (check at least one):

- A parent being unable to provide care due to the death of the other parent;
- A serious illness or terminal illness of a parent;
- The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
- The incarceration of a parent;
- The loss or uninhabitability of the child's home as the result of a natural disaster;
- A period of active military duty of a parent exceeding 24 months; or
- I am unable to locate a parent or parents at this time to notify them of my intended authorization because (list reasons):

_____.

7. Names of parent(s) or legal custodian(s):

8. Address of parent(s) or legal custodian(s):

9. Phone numbers and email addresses of parent(s) or legal custodian(s):

10. Kinship caregiver's date of birth: _____

11. Kinship caregiver's State of Georgia driver's license number or identification cards number:

WARNING: DO NOT SIGN THIS FORM IF ANY OF THE STATEMENTS ABOVE ARE INCORRECT OR YOU WILL BE COMMITTING A CRIME PUNISHABLE BY A FINE, IMPRISONMENT, OR BOTH.

I recognize that if I knowingly and willfully make a false statement in this affidavit, I will be guilty of the crime of false swearing.

(Kinship caregiver's signature)

(Kinship caregiver's printed name)

Sworn to and subscribed before me this
_____ day of _____, _____.

Notary public (SEAL)
My commission expires: _____.

NOTICES:

1. This declaration does not affect the rights of the named child's parent or legal guardian regarding the care, custody, and control of the child and does not mean that the kinship caregiver has legal custody of the child.
2. A person that relies on this affidavit has no obligation to make any further inquiry or investigation.
3. This affidavit is not valid for more than one year after the date on which it is executed.

ADDITIONAL INFORMATION:

TO KINSHIP CAREGIVERS:

1. If the child stops living with you for a period of more than 30 days, you are required to provide notice not later than 30 days after such period to anyone to whom you have given this affidavit as well as anyone of whom you have actual knowledge who received the affidavit from a third party.
2. If you do not have the information in item 11 of the affidavit (State of Georgia driver's license or identification card), you must provide another form of identification such as your social security number.

TO SCHOOL OFFICIALS:

The school system may require additional reasonable evidence that the kinship caregiver resides at the address provided in item 4 of the affidavit.

TO HEALTH CARE PROVIDERS AND HEALTH CARE SERVICE PLANS:

1. No person that acts in good faith reliance upon a kinship caregiver's affidavit to render educational services or medical services directly related to academic enrollment or any curricular or extracurricular activities, without actual knowledge of facts contrary to those stated in the affidavit, shall be subject to criminal prosecution or civil liability to any person, or subject to any professional disciplinary action, for such reliance if the applicable portions of the form are completed.
2. This affidavit does not confer dependency for health care coverage purposes.

GEORGIA GRANDPARENT POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

NOTICE:

(1) THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE GRANDPARENT THAT YOU DESIGNATE (THE AGENT GRANDPARENT) POWERS TO CARE FOR YOUR MINOR CHILD, INCLUDING THE POWER TO: ENROLL THE CHILD IN SCHOOL AND IN EXTRACURRICULAR SCHOOL ACTIVITIES; HAVE ACCESS TO SCHOOL RECORDS AND DISCLOSE THE CONTENTS TO OTHERS; ARRANGE FOR AND CONSENT TO MEDICAL, DENTAL, AND MENTAL HEALTH TREATMENT FOR THE CHILD; HAVE ACCESS TO SUCH RECORDS RELATED TO TREATMENT OF THE CHILD AND DISCLOSE THE CONTENTS OF THOSE RECORDS TO OTHERS; PROVIDE FOR THE CHILD'S FOOD, LODGING, RECREATION, AND TRAVEL; AND HAVE ANY ADDITIONAL POWERS AS SPECIFIED BY THE PARENT.

(2) THE AGENT GRANDPARENT IS REQUIRED TO EXERCISE DUE CARE TO ACT IN THE CHILD'S BEST INTEREST AND IN ACCORDANCE WITH THE GRANT OF AUTHORITY SPECIFIED IN THIS FORM.

(3) A COURT OF COMPETENT JURISDICTION MAY REVOKE THE POWERS OF THE AGENT GRANDPARENT IF IT FINDS THAT THE AGENT GRANDPARENT IS NOT ACTING PROPERLY.

(4) THE AGENT GRANDPARENT MAY EXERCISE THE POWERS GIVEN IN THIS POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD THROUGHOUT THE CHILD'S MINORITY UNLESS THE PARENT REVOKES THIS POWER OF ATTORNEY AND PROVIDES NOTICE OF THE REVOCATION TO THE AGENT GRANDPARENT OR UNTIL A COURT OF COMPETENT JURISDICTION TERMINATES THIS POWER.

(5) THE AGENT GRANDPARENT MAY RESIGN AS AGENT AND MUST IMMEDIATELY COMMUNICATE SUCH RESIGNATION TO THE PARENT, AND IF COMMUNICATION WITH SUCH PARENT IS NOT POSSIBLE, THE AGENT GRANDPARENT SHALL NOTIFY CHILD PROTECTIVE SERVICES OR SUCH GOVERNMENT AUTHORITY THAT IS CHARGED WITH ASSURING PROPER CARE OF SUCH MINOR CHILD.

(6) THIS POWER OF ATTORNEY MAY BE REVOKED IN WRITING BY ANY AUTHORIZING PARENT. IF THE POWER OF ATTORNEY IS REVOKED, THE REVOKING PARENT SHALL NOTIFY THE AGENT GRANDPARENT, SCHOOL, HEALTH CARE PROVIDERS, AND OTHERS KNOWN TO THE PARENT TO HAVE RELIED UPON SUCH POWER OF ATTORNEY.

(7) IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

made this _____ day of _____, ____.

(1) (A) I, _____ (insert name and address of parent or parents), hereby appoint _____ (insert name and address of grandparent to be named as agent) as attorney in fact (the agent grandparent) for my child _____ (insert name of child) to act for me and in my name in any way that I could act in person.

(B) I hereby certify that the agent grandparent named herein is the (place a check mark beside the appropriate description):

- Biological grandparent;
- Stepgrandparent;
- Biological great-grandparent; or
- Stepgreat-grandparent

(2) The agent grandparent may:

- (A) Enroll the child in school and in extracurricular activities, have access to school records, and may disclose the contents to others;
- (B) Arrange for and consent to medical, dental, and mental health treatment of the child, have access to such records related to treatment of the child, and disclose the contents of such records to others;
- (C) Provide for the child’s food, lodging, recreation, and travel; and
- (D) Carry out any additional powers specified by the parent as follows:

(3) The powers granted above shall not include the following powers or shall be subject to the following rules or limitations (here you may include any specific limitations that you deem appropriate):

(4) This power of attorney for the care of a minor child is being executed because of the following hardship (initial all that apply):

- (A) The death, serious illness, or terminal illness of a parent;

- ____ (B) The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
- ____ (C) The loss or uninhabitability of the child's home as the result of a natural disaster;
- ____ (D) The incarceration of a parent; or
- ____ (E) A period of active military duty of a parent.

(5) (Optional) If a guardian of my minor child is to be appointed, I nominate the following person to serve as such guardian: _____
(insert name and address of person nominated to be guardian of the minor child).

(6) I am fully informed as to all of the contents of this form and I understand the full import of this grant of powers to the agent grandparent.

(7) I certify that the minor child is not emancipated, and, if the minor child becomes emancipated, this power of attorney shall no longer be valid.

(8) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. And Section 7801, et seq., I hereby certify that this power of is not executed for the primary purpose of unlawfully enrolling the child in a school so that the child may participate in the academic or interscholastic athletic programs provided by that school.

(9) I certify that, to my knowledge, the minor child's welfare is not the subject of an investigation by the Department of Human Resources.

(10) I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____
Printed Name: _____

Parent Signature: _____
Printed Name: _____

Signed and sealed in the presence of: _____
Notary public
My commission expires _____

The following notice shall be attached to the grandparent power of attorney:

ADDITIONAL INFORMATION:

To the Grandparent designated as attorney in fact (Agent Grandparent):

- (1) If a change in circumstances results in the child not living with you for more than six weeks during a school term and such change is not due to hospitalization, vacation, study abroad, or some reason otherwise acceptable to the school, you should notify in writing the school in which you have enrolled the child and to which you have given this power of attorney form.
- (2) You have the authority to act on behalf of the minor child until each parent who executed the power of attorney for the care of the minor child revokes the power of attorney in writing and provides notice of revocation to you as provided in O.C.G.A. Section 19-9-128.
- (3) If you are made aware of the death of the parent who executed the power of attorney, you must notify the surviving parent as soon as practicable. With the consent of the surviving parent, or if the whereabouts of the surviving parent are unknown, the power of attorney may continue for up to six months so that the child may receive consistent care until more permanent custody arrangements are made.
- (4) You may resign as agent by notifying each parent in writing by certified mail or statutory overnight delivery, return receipt requested, and if you become unable to care for the child, you shall cause such resignation to be communicated to the parent. If communication with such parent is not possible, you must notify child protective services or such government authority that is charged with assuring proper care of such minor child.

To school officials:

- (1) Except as provided in the policies and regulations of the county school board and the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. and Section 7801, et seq., this power of attorney, properly completed and notarized, authorizes the agent grandparent named herein to enroll the child named herein in school in the district in which the agent grandparent resides. That agent grandparent is authorized to provide consent in all school related matters and to obtain from the school district educational and behavioral information about the child.

Furthermore, this power of attorney shall not prohibit the parent of the child from having access to all school records pertinent to the child.

(2) The school district may require such residency documentation as is customary in that school district.

(3) No school official who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

To health care providers:

(1) No health care provider who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

(2) The parent continues to have the right to all medical, dental, and mental health records pertaining to the minor child.

GEORGIA GENERAL POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

NOTICE:

(1) THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE CAREGIVER THAT YOU DESIGNATE (THE AGENT CAREGIVER) POWERS TO CARE FOR YOUR MINOR CHILD, INCLUDING THE POWER TO: ENROLL THE CHILD IN SCHOOL AND IN EXTRACURRICULAR SCHOOL ACTIVITIES; HAVE ACCESS TO SCHOOL RECORDS AND DISCLOSE THE CONTENTS TO OTHERS; ARRANGE FOR AND CONSENT TO MEDICAL, DENTAL, AND MENTAL HEALTH TREATMENT FOR THE CHILD; HAVE ACCESS TO SUCH RECORDS RELATED TO TREATMENT OF THE CHILD AND DISCLOSE THE CONTENTS OF THOSE RECORDS TO OTHERS; PROVIDE FOR THE CHILD'S FOOD, LODGING, RECREATION, AND TRAVEL; AND HAVE ANY ADDITIONAL POWERS AS SPECIFIED BY THE PARENT.

(2) CURRENTLY, GEORGIA ONLY LEGALLY RECOGNIZES POWERS OF ATTORNEY GRANTED TO A GRANDPARENT, STEP-GRANDPARENT, GREAT GRANDPARENT, OR STEP GREAT-GRANDPARENT. HOWEVER, IF YOU DO NOT WANT TO GIVE SOMEONE LEGAL CUSTODY AT THIS TIME, THE GENERAL POWER OF ATTORNEY MAY SERVE YOUR NEEDS EVEN IF YOU OR THE CAREGIVER IS NOT A GRANDPARENT SINCE MANY THIRD PARTIES MAY STILL HONOR THE AGREEMENT.

(3) THE AGENT CAREGIVER IS REQUIRED TO EXERCISE DUE CARE TO ACT IN THE CHILD'S BEST INTEREST AND IN ACCORDANCE WITH THE GRANT OF AUTHORITY SPECIFIED IN THIS FORM.

(4) THE AGENT CAREGIVER MAY EXERCISE THE POWERS GIVEN IN THIS POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD THROUGHOUT THE CHILD'S MINORITY UNLESS THE PARENT SPECIFIES A DIFFERENT DURATION, THE PARENT REVOKES THIS POWER OF ATTORNEY AND PROVIDES NOTICE OF THE REVOCATION TO THE AGENT CAREGIVER, OR UNTIL A COURT OF COMPETENT JURISDICTION TERMINATES THIS POWER. THIRD PARTIES ARE CURRENTLY **NOT** LEGALLY REQUIRED TO HONOR POWER OF ATTORNEYS GIVEN TO A NON-GRANDPARENT CAREGIVER IN GEORGIA.

(5) THE AGENT CAREGIVER MAY RESIGN AS AGENT AND MUST IMMEDIATELY COMMUNICATE SUCH RESIGNATION TO THE PARENT, AND IF COMMUNICATION WITH SUCH PARENT IS NOT POSSIBLE, THE AGENT CAREGIVER SHALL NOTIFY CHILD PROTECTIVE SERVICES OR SUCH GOVERNMENT AUTHORITY THAT IS CHARGED WITH ASSURING PROPER CARE OF SUCH MINOR CHILD.

(6) THIS POWER OF ATTORNEY MAY BE REVOKED IN WRITING BY ANY AUTHORIZING PARENT. IF THE POWER OF ATTORNEY IS REVOKED, THE REVOKING PARENT SHALL NOTIFY THE AGENT CAREGIVER, SCHOOL, HEALTH CARE PROVIDERS, AND OTHERS KNOWN TO THE PARENT TO HAVE RELIED UPON SUCH POWER OF ATTORNEY.

(7) IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

made this _____ day of _____, ____.

(1) I, _____ (insert name and address of parent or parents), hereby appoint _____ (insert name and address of CAREGIVER to be named as agent) as attorney in fact (the agent CAREGIVER) for my child _____ (insert name of child) to act for me and in my name in any way that I could act in person.

(2) The agent CAREGIVER may:

- (A) Enroll the child in school and in extracurricular activities, have access to school records, and may disclose the contents to others;
- (B) Arrange for and consent to medical, dental, and mental health treatment of the child, have access to such records related to treatment of the child, and disclose the contents of such records to others;
- (C) Provide for the child's food, lodging, recreation, and travel; and
- (D) Carry out any additional powers specified by the parent as follows:

(3) The powers granted above shall not include the following powers or shall be subject to the following rules or limitations (here you may include any specific limitations that you deem appropriate):

(4) This power of attorney for the care of a minor child is being executed because:

(5) (Optional) If a guardian of my minor child is to be appointed, I nominate the following person to serve as such guardian: _____ (insert name and address of person nominated to be guardian of the minor child).

(6) Duration of Power of Attorney:

(A) _____ (Initials) This power of attorney is effective beginning _____, 2 _____ and ending _____

_____, 2_____. I reserve the right to revoke this power and authority at any time OR

(B) _____(Initials) This power of attorney is effective until I revoke this power of attorney.

(7) I am fully informed as to all of the contents of this form and I understand the full import of this grant of powers to the agent CAREGIVER.

(8) I certify that the minor child is not emancipated, and, if the minor child becomes emancipated, this power of attorney shall no longer be valid.

(9) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. And Section 7801, et seq., I hereby certify that this power of is not executed for the primary purpose of unlawfully enrolling the child in a school so that the child may participate in the academic or interscholastic athletic programs provided by that school.

(10) I certify that, to my knowledge, the minor child's welfare is not the subject of an investigation by the Department of Human Resources.

(11) I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____

Printed Name: _____

Parent Signature: _____

Printed Name: _____

Signed and sealed in the presence of: _____

Notary public

My commission expires _____

REVOCATION OF POWER OF ATTORNEY FOR CARE OF A MINOR CHILD

Part I: To be filled out by parent(s) of minor child:

1. Minor Child's Name _____

2. Mother/Legal Guardian's Name & Address _____

3. Father/Legal Guardian's Name & Address _____

4. Caregiver's Name & Address _____

Part II: To be filled out by the parent(s).

I, _____, hereby revoke the Power of Attorney for Care of a
(Name of Parent(s))

Minor Child for the child listed above in Part I, which was previously executed on

_____ and given to _____ to act as said minor child's
(Date) *(Name of Caregiver)*

agent caregiver. All rights, power, and authority previously granted to said agent caregiver pursuant to said Power of Attorney for Care of a Minor Child are hereby revoked, effective immediately. I have sent a copy of this revocation to the agent caregiver by certified mail or statutory overnight delivery, return receipt requested, and upon receipt of the revocation, the agent caregiver shall cease to act as agent. I have also sent copies of the revocation to the child's

school, health care provider, and all others known to me to have relied upon such power of attorney.

IN WITNESS WHEREOF, I/We sign this Revocation of Power of Attorney for Care of a Minor Child and declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____
Printed Name: _____

Parent Signature: _____
Printed Name: _____

Signed and sealed in the presence of: _____
Notary public
My commission expires _____



NON-PARENTAL AFFIDAVIT

Pursuant to Board Policy JBCA, Resident Student and Administrative Regulation JBC-R, Student Admissions, this Affidavit shall be completed during enrollment and/or re-enrollment in Atlanta Public Schools. This Affidavit shall be completed for students living in the City Atlanta Public Schools System, but who are residing with a person who is not the parent, legal guardian or grandparent. This Affidavit shall be completed by the adult with whom the student is living. This affidavit should not be utilized for Homeless students. Please see Board Policy JBC(1) and Administrative Regulation JBC(1)-R, Homeless Students.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein. The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

Name of Non-Parent: _____
Address: _____
City: _____ State: **GEORGIA** Zip: _____
Home Phone: _____ Work Phone: _____
Cellular Phone: _____ Other: _____

1. Reason the student is living with the above named adult (check one):

- A. The death, serious illness, or incarceration of a parent or legal guardian.
- B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
- C. Abuse or neglect by the parent or legal guardian.
- D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
- E. The loss or inhabitability of the student's home as the result of a natural disaster.
- F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
- G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
- H. The parents cannot be located.
- I. Other circumstances as approved by the school system (explain below).

2. The name and last known address of the child's parent(s) or legal guardian is: _____

3. I assumed control and charge of this child, which I provide 24 hours per day and 7 days per week, on _____ (day/month/year).

4. The name and address of the last school that the child attended is: _____

5. The school system's superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system. The audit may also include a personal visit by a school district attendance officer or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school.

6. I attest that this request to attend an Atlanta Public School is not primarily related to attendance at a particular school in Atlanta Public Schools, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.

7. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

8. I further attest that I have been given the responsibility for educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.

9. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.

10. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

NOTICE OF PENALTIES AND LIABILITY

I understand that: **(Please initial each paragraph)**

_____ 1. If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133 (a).

_____ 2. If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same.

_____ 3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1.

_____ 4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2.

_____ 5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20.

_____ 6. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71.

_____ 7. By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions.

I solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief. I understand that the student is conditionally enrolled for 30 days and this Affidavit is valid for 30 days to allow me to procure a Legal Guardianship for the above minor child. If guardianship is not presented within 30 days, school may withdraw the student.

Signature of adult with whom the child is living

Date

Sworn to and Subscribed before me

this _____ day of _____ 20 _____

Notary Public
My Commission Expires: _____

Guardianship can be obtained by contacting the Fulton County Probate Court located at 136 Pryor Street, Room C-230, Atlanta, Georgia 30303, (404-730-4697). Information regarding this process is also available online at www.gaprobate.org. The Court may require a fee for this process, but no fee will be required if an affidavit of indigence is filed with the Court (See O.C.G.A. § 15-9-61). For persons seeking guardianship of students in their care, the guardian must be an adult of at least 18 years of age or an emancipated minor at least 16 years of age residing within the boundaries of Atlanta Public Schools. The District may object to petitions of guardianship through the court system.

NON-PARENTAL AFFIDAVIT

This form must be fully completed.
Please Print or Type

THIS FORM SHALL BE COMPLETED BY AN ADULT WITH WHOM THE STUDENT IS LIVING.

This form shall be completed for students living in the Cobb County School District (District) who do not live in the home of their parents or guardian.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____ and whose birth date is _____
is living with me at the following address:

My Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

1. Reason the student is living with the above-named adult (check at least one)
 - A. The death, serious illness, or incarceration of a parent or legal guardian.
 - B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
 - C. Abuse or neglect by the parent or legal guardian.
 - D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
 - E. The loss or inhabitability of the student's home as the result of a natural disaster.
 - F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
 - G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
 - H. The parents cannot be located.
2. The name and last known address of the child's parent(s) or guardian is:

3. I assumed control and charge of this student, which I provide 24 hours per day and 7 days per week, on _____
(day/month/year)
4. The name and address of the last school that the child attended is:

5. The School District's Superintendent, or his/her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the District. The audit may also include a personal visit by a District attendance officer or other employee of the District at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the District discovers fraud or misrepresentation, student shall be withdrawn from school.
6. I attest that this request to attend the Cobb County School District is not primarily related to attendance at a particular school in the Cobb County School District *nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.*
7. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

8. I further attest that I have been given the responsibility for educational decisions for the student including, but not limited to, receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.
9. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I have made every effort to secure that signature.
10. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the Cobb County School District.

NOTICE OF PENALTIES AND LIABILITY:

I understand that:

1. If I falsify information or defraud the Cobb County School District on this affidavit, I will be obligated to pay for the costs incurred by the District for the period during which the ineligible student is enrolled, and shall remunerate the District as set forth in O.C.G.A. § 20-2-133 (a). _____
(initial)
2. If the costs incurred by the District are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same. _____
(initial)
3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1. _____
(initial)
4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2. _____
(initial)
5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20. _____
(initial)
6. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71. _____
(initial)
7. By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions. _____
(initial)

I SOLEMNLY AFFIRM UNDER THE PENALTIES LISTED ABOVE THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Signature of affiant (adult with whom the child is living)

Signature of parent/guardian (if available)

<p>PLEASE NOTARIZE</p> <p>Sworn to and subscribed before me this ____ day of _____, 20____.</p> <p>Notary Public: _____</p>	<p>Name of Affiant (Adult with whom the child is living) (Please Print): _____</p> <p>Enrolling Person Signature: _____</p> <p>Principal/Designee Signature: _____</p>
---	--



GWINNETT COUNTY PUBLIC SCHOOLS NON-PARENTAL AFFIDAVIT

This Affidavit shall be completed for students living in the Gwinnett County Public School System, but who are residing with a person who is not the parent or legal guardian. This Affidavit shall be completed by the adult with whom the student is living. This Affidavit should not be utilized for Homeless students.

The school system's superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____, and whose birth date is _____, is living with me at the following address:

Name of Non-Parent: _____ Address: _____

City/State/Zip: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

1. Reason the student is living with the above named adult (check one).
- a. The death, serious illness, or incarceration of a parent or legal guardian.
 - b. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
 - c. Abuse or neglect by the parent or legal guardian.
 - d. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
 - e. The loss or inhabitability of the student's home as the result of a natural disaster.
 - f. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
 - g. The parents cannot be located.
 - h. Other circumstances as approved by the school system (explain below).

District explanation: _____

2. The name and last known address of the child's parent(s) or legal guardian:

3. I assumed control and charge of this child, which I provide 24 hours per day and seven days per week, on (month/day/year). _____

4. The name and address of the last school that the child attended:

5. I attest that this request to attend a Gwinnett County Public School is not primarily related to attendance at a particular school in Gwinnett County, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.
6. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.
7. I further attest that I have been given the responsibility for educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school-related activities, and taking appropriate action in connection with student records.
8. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.
9. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

Signature of affiant (adult with whom the child is living) Signature of parent/legal guardian (if available)

NOTICE OF PENALTIES AND LIABILITY

I understand that:

1. If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133(a).
2. If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same.
3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1.
4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2.

5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20.
6. I may be prosecuted, held criminally liable and punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of fast swearing pursuant to O.C.G.A. § 16-10-71.

By signing on the line provided below, I _____ affirm that I have read and understand each of these provisions listed above.

I _____ solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of affiant (adult with whom the child is living)

Signature of parent/legal guardian (if available)

State of Georgia, County of Gwinnett

I, _____, a Notary Public for said county and state, do hereby certify that _____ personally appeared before me this day and acknowledged the due executing of this foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, _____.

My commission expires _____, _____

Signature of Notary Public

Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.

Appendix G: Non-Parental Affidavit of Residence Sample Form

NON-PARENTAL AFFIDAVIT OF RESIDENCE

This form shall be completed for students living in _____ County/City School System, but not living in the home of the parents or legal guardian.

This form shall be completed by an adult with whom the student is living.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

Name: _____

Address: _____

City: _____, State, _____, Zip _____

Home Phone: _____ Work Phone: _____

Cellular Phone: _____

Reason the student is living with the above named adult (check one)

- A. The death, serious illness, or incarceration of a parent or legal guardian.
- B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
- C. Abuse or neglect by the parent or legal guardian.
- D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
- E. The loss or inhabitability of the student's home as the result of a natural disaster.
- F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
- G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
- H. The parents cannot be located.
- I. Other circumstances as approved by the school system (explain below).

District explanation: _____

The name and last known address of the child's parent(s) or legal guardian is:

I assumed control and charge of this child, which I provide 24 hours per day and 7 days per week, on _____ (day/month/year).

The name and address of the last school that the child attended is:

**Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.**

The school system’s superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system. The audit may also include a personal visit by a school district attendance officer or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school.

I attest that this request to attend a _____ County/City school is not primarily related to attendance at a particular school in _____ County/City, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.

I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

I further attest that I have been given the responsibility for making educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.

I further attest that I have been given the responsibility for making medical decisions and consenting to any surgical or medical treatment or procedures.

If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.

I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

NOTICE OF PENALTIES AND LIABILITY:

I understand that:

If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133 (a).

_____ (initial)

If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney’s fees incurred by the Board of Education in the collection of same. _____ (initial)

I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1. _____(initial)

**Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.**

I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2. ____ (initial)

I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20. _____ (initial)

I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71. _____ (initial)

By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions.

I solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of affiant (adult with whom the child is living)

Signature of parent/legal guardian

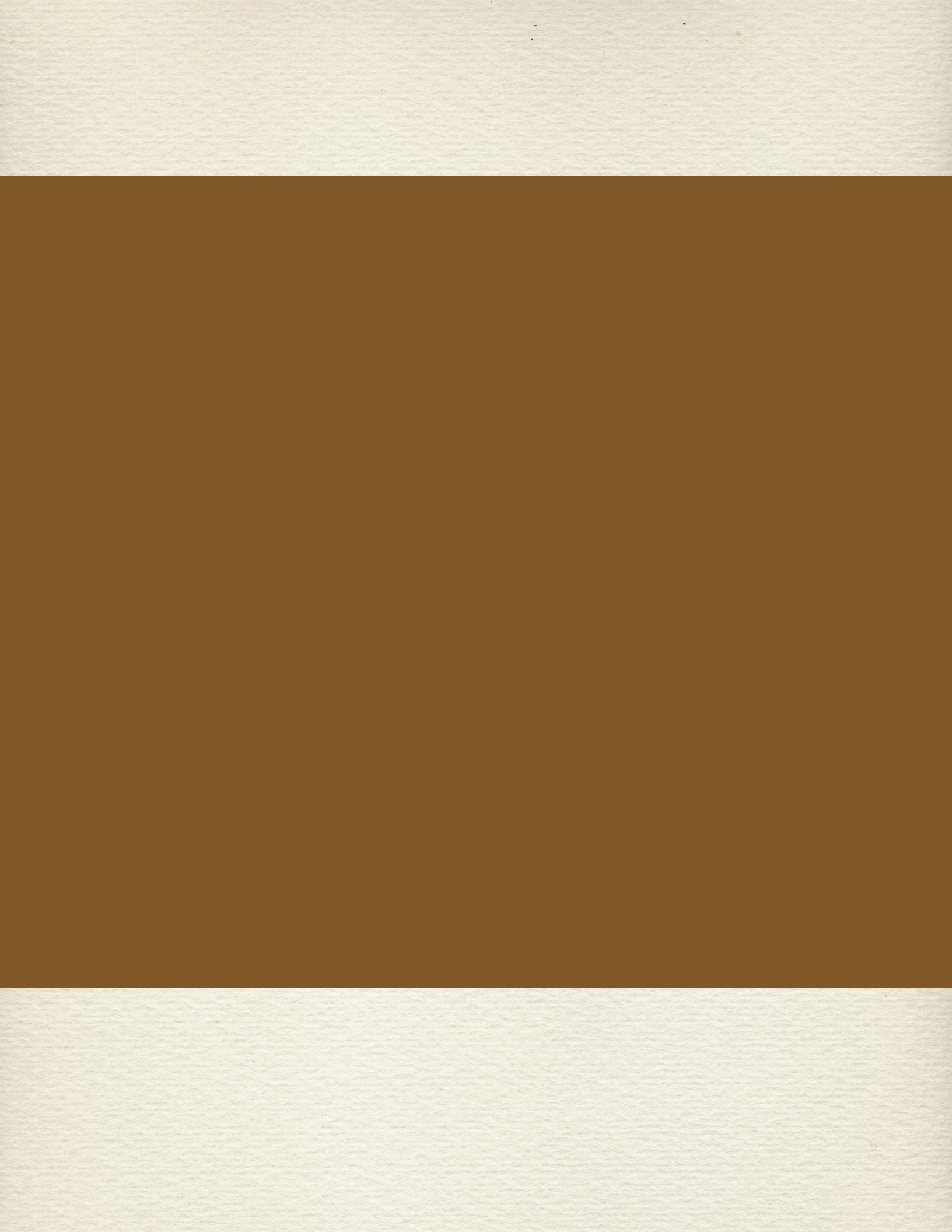
State of: _____ County of: _____

I, _____, a Notary Public for said county and state, do hereby certify that _____ personally appeared before me this day and acknowledged the due executing of the foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, 2____.

My commission expires _____, 2____

Signature of Notary Public





Immigrant Family Preparedness Guide for Georgia Families

Acknowledgements

We would like to acknowledge the following for their contributions to this guide:

Atlanta Legal Aid Society

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Steptoe & Johnson LLP

The Florence Immigrant and Refugee Rights Project

*And all the individuals that took the time to review
and comment on the drafts of this manual*

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MAKE A PLAN FOR YOUR CHILDREN IN CASE YOU ARE DETAINED OR DEPORTED

If you are away from your children, it is a good idea to have a plan to make sure they are taken care of. If you want someone you trust to take care of your children, that person will need permission from you to take care of them and make decisions while you are gone.

This guide has a lot of information to help you with this. There are also different forms you can use. You can choose which form will work for you at what time.

If you want the person you trust to have legal custody of your children, you must go to court. To do that, you have to talk to a family lawyer.

These papers are ways to help in case you are away for a while. They are not advice from a lawyer about what to do.

PROTECT YOURSELF FROM FAKE NOTARIOS!

Make sure the lawyer you work with has a license and has the education to help you with your case.

In many countries that speak Spanish, someone called a “notario” is a lawyer or a person who went to school to learn the law. Remember, in the U.S., a “notary” is a person who has the job of watching people sign important documents. A “notary” in the U.S. is not allowed to write legal papers or give any advice to you, unless they are also a lawyer.

You can check if your lawyer is licensed by calling the State Bar of Georgia at 404-527-8700 or 800-334-6865.

Do not hire anyone who:

- Won't give you papers in writing
- Charges you money for papers that are blank
- Promises you things because they “know people” at Immigration
- Pretends to be a lawyer or immigration specialist
- Asks you to lie on papers
- Asks you to sign a blank paper
- Charges you money to be on a “waiting list” or “in line”. Remember: **There is no list. There is no line.**

If you think the lawyer you are dealing with is fake, you may call the:

American Bar Association Commission on Immigration at (202) 662-1007. To access more resources on fighting Notario fraud, please visit: https://www.americanbar.org/groups/public_services/immigration/projects_initiatives/fightnotariofraud/victimresources.html

State Bar of Georgia at their consumer protection program at 404-527-8759. To learn more or to access a complaint form, please visit: <https://www.gabar.org/committeesprogramssections/programs/upl/>

Federal Trade Commission in English or Spanish (877-FTC-HELP). You can also go to www.stopnotariofraud.org

Immigration Court (Executive Office for Immigration Review) You can also make a formal complaint if you are a victim of immigration fraud to the immigration court at <https://www.justice.gov/eoir/submit-complaint>

IN CASE YOU ARE DETAINED

1 STEP 1

COLLECT IMPORTANT INFORMATION

The first step in making your family plan is to get together important information, phone numbers and papers. Fill out the chart below to get started.

Important Children's Information

Keep this information so that the people you trust to care for your child have it while you are gone.

Child's Name	
Date of Birth	
Child's Cell Phone Number (if they have one)	
School	
School Address	
School Phone Number	
Teacher's Name	
Grade	
School Counselor	
Afterschool Program	
Afterschool Program Phone Number	
Other Camp/Sports/Program	
Other Camp/Sports/ Program Phone Number	
Allergies	
Medical conditions	
Medications	

Emergency Phone Numbers and Important Information

Keep these numbers in one place that everyone in your family knows.

Emergency	
Emergency Now	911
Police Department	
Fire Department	
Poison Control	
Family	
Mother/Parent/Guardian	
Home Phone	
Cell Phone	
Work Address	
Work Phone	
Father/Parent/Guardian	
Home Phone	
Cell Phone	
Work Address	
Work Phone	
Other Emergency Number and How You Know Them	
Cell Phone	
Caregiver (person you trust to watch your children)	
Home Phone	
Cell Phone	
Email Address	
Address	
Work Address	
Work Phone	

Other Contacts	
Doctor	
Phone Number	
Health Insurance Company	
Policy Number	
Pediatrician	
Phone Number	
Health Insurance Company	
Policy Number	
Dentist	
Phone Number	
Health Insurance Company	
Policy Number	
Church or Religious Center	
Address	
Phone Number	
Embassy/Consulate (Office of your home country)	
Address	
Phone Number	
Lawyer/Nonprofit Legal Services Provider	
Address	
Phone Number	

Contact Information for Family and/or Friends in Home Country	
Name	
Phone	
Name	
Phone	
Name	
Phone	

If you are worried about being picked up by ICE with phone numbers on you, you can also set up a plan where you call one person who has safe immigration status and then they can call everyone else on your plan.

Get Together Important Documents

Make sure you have all the information you may need for your children, like: birth certificates, passports, Social Security Cards, important papers from their doctor and school (examples of school documents: report cards, Individualized Education Plans/504 Plans, progress reports), "Power of Attorney" (a legal paper saying someone can make decisions for you) and emergency phone numbers. You should make a different file for each of your children and have all of them in a safe place in your home. Make sure you make copies of all the information.



2 STEP 2

DECIDE WHO YOU TRUST TO TAKE CARE OF YOUR CHILDREN (THIS IS CALLED A “CAREGIVER”)

A caregiver is someone who you would ask to take care of your children if you could not. Most parents already know who that person is, but don't always have plans ready. Follow these steps to make a plan for your children's care in case you are picked up by ICE.

The person you decide to trust as caregiver can be any responsible adult you choose, like your husband or wife, aunt or uncle, brother or sister, or other family member. The caregiver can also be a godparent, a friend, or a neighbor. If you have more than one child, you may want to pick different caregivers for different children, or you may choose to keep them together with one person. If you can, choose a caregiver who has lawful immigration status.

You want to choose a caregiver who can pick your children up right away after you are taken into custody. *If after attempting to find a family member to take custody of the children and there is no one to pick up your children right away, the Department of Family and Children's Services may take your children and file a case against you. This is why it is important to make a plan in advance.*



3 STEP 3

MAKE SURE THE CAREGIVER YOU PICK AGREES TO TAKE CARE OF YOUR CHILDREN

After you decide who will be the caregiver for your children, talk with them. There are many important things to discuss with them and you want to make sure that everyone is comfortable with the plan. Make sure the caregiver understands that your children may be living with them for a long time. Talk with the caregiver to make sure they have the money to take care of your children as well as the space in their home.

Here are some questions you should think about when talking with the caregiver you choose:

- **How long will they be able to take care of your children?**

There is no way to know how long you may be away from your children. It may be months or even years. If you are deported, it might be an even longer period of time. Sadly, many children end up in foster care because the caregiver thought they would only have the children for a few weeks and couldn't keep them any longer. Make sure the caregiver you pick is ready and able to keep your children for a long time.

- **How much will it cost to take care of your children?**

The caregiver you choose will need to take care of everything for your children. Your children will need food, a home, travel, doctor visits, and things like clothing and books. The caregiver may be able to obtain public assistance (money or health insurance from the government). But if they can't, will the caregiver be able to pay for all of these things for your children? Can you set money aside to help in case you are picked up by ICE? Are there friends or family members who can give the caregiver money for what your children need?

- **Who else lives in the house?**

Do you know and trust everyone who lives in your caregiver's home? You need to make sure you are comfortable with everyone who will be close to your children. If there is someone in the house who has been to jail or prison, or who has been reported for hurting a child in the past, your children may not be allowed to stay in that house. And, if someone calls the Department for Family and Child Services about the safety of your children, a judge could place them in a foster home for the state to take care of.



- **Will there be adults around to watch the children?**

You need to make sure your children will be watched at all times so they are safe. Find out who will be watching your children at home and if they will go to daycare when they are not at home. Make sure the caregiver's home is safe for all of your children.

- **Does your caregiver know of any special needs your children have (like medicine or doctor visits)?**

Give the caregiver the phone number and address and name of your children's doctor and any health insurance cards or papers they will need. Provide the caregiver with a copy of your child's Individualized Education Plan/504 Plan from school, if you have one. If any of your children take medicine, tell the caregiver where you keep the medication and where they can get more.

- **Does your caregiver know where your children go to school?**

You should make sure your caregiver knows what school your children attend in case they have to pick them up in an emergency. You may also want to give your children's school a paper in writing that says your caregiver is allowed to pick your children up from school and that the school should call the caregiver about your children while you are away.



IF YOU ARE DETAINED OR DEPORTED FROM THE U.S. AND YOU WANT YOUR CHILDREN TO RETURN TO YOUR HOME COUNTRY WITH YOU

Get Passports for Your Children

If your child is under 16 and is a U.S. citizen, then usually both parents have to go with the child to apply for a passport.

If one parent cannot go, that parent must give the other parent permission by filling out a "Statement of Consent" (form DS-3053). That parent must show ID to a notary and have them stamp the paper with their notary seal. Then, turn in the passport application (Form DS-11) with Form DS-3053, and attach a copy of an ID for the other parent (the one that was stamped by the notary).

Parents can apply for a passport for their child without the other parent's consent if:

- One parent can prove they have sole custody (legal form saying only one parent has custody)

OR

- They can show there is an emergency or a special reason why the other parent is not able to sign papers (the other parent cannot be found or has been deported). If this is true, then one parent can fill out a "Statement of Exigent/Special Family Circumstances" (Form DS-5525). The Department of State will read your paper explaining why the other parent can't give permission, and decide.

To determine where to apply for a U.S. passport, please visit:

<https://travel.state.gov/content/passports/en/passports/information/where-to-apply.html>

You should bring the following documents:

1. Papers proving citizenship for your child with one of these:

- Fully-valid, undamaged U.S. passport (may be expired)
- U.S. birth certificate
- Consular Report of Birth Abroad or Certification of Birth
- Certificate of Citizenship

2. Papers that say you are the parent of the child that you want the passport for. You can use one of these:

- U.S. birth certificate (also evidence of U.S. citizenship)
- Consular Report of Birth Abroad (also evidence of U.S. citizenship)
- Foreign birth certificate
- Adoption decree
- Divorce/Custody decree
- For guardians or temporary guardians, a court order appointing the guardians.

3. If you have sole custody of your child, you need to show one of these papers:

- Complete court order granting you sole legal custody of the child
- Complete court order specifically permitting you to apply for your child's passport
- Certified copy of the child's birth certificate listing you as the only parent
- Certified copy of an adoption decree listing you as the only parent
- Certified copy of a judicial declaration of incompetence of the non-applying parent
- Certified copy of the death certificate of the non-applying parent
- Copy of Georgia Statute, O.C.G.A. §19-7-25¹

4. Parents must bring one of these to prove their identity- you must bring a copy also.

- In-state, fully-valid driver's license
- Valid or expired, undamaged, U.S. passport
- Certificate of Naturalization or Citizenship
- Government employee ID (city, county, state or federal)
- U.S. military ID or military dependent ID
- Valid foreign passport
- Matricula Consular (Mexican Consular Identification, commonly used by a Mexican parent of a U.S. citizen child applicant)
- If the parent or guardian does not have the type of IDs listed above, visit the website below for more alternatives: <https://travel.state.gov/content/passports/en/passports/information/identification.html>

5. Parents must bring a 2x2 inch picture of their child. Make sure to pay attention to what it must look like:

- Printed on photo quality paper
- Sized such that the head is between 1 inch and 1 3/8 inches (between 25 and 35 mm) from the bottom of the chin to the top of the head
- Taken within the last 6 months to reflect your current appearance
- Taken in front of a plain white or off-white background
- Taken in full-face view directly facing the camera
- With a neutral facial expression and both eyes open
- Taken in clothing that you normally wear on a daily basis
- Uniforms should not be worn in your photo, except religious clothing that is worn daily
- Do not wear a hat or head covering that obscures the hair or hairline, unless worn daily for a religious purpose. Your full face must be visible, and the head covering must not cast any shadows on your face
- Headphones, wireless hands-free devices or similar items are not acceptable in your photo
- If you normally wear prescription glasses, a hearing device or similar articles, they may be worn for your photo

¹ Under Georgia law, only the mother of a child born out of marriage has custody of that child. O.C.G.A. §19-7-25. The father of the child has no legal rights with respect to the child unless he marries the mother or he obtains a court order "legitimizing" the child (declaring him the legal father of the child) and a specific order for custody and visitation. O.C.G.A. §19-7-22. Because not all states follow this law, you may still have to complete Form DS-5525 statement of exigent/special family circumstances to explain why you shouldn't need father's consent in this situation.

- Dark glasses or non-prescription glasses with tinted lenses are not acceptable unless you need them for medical reasons (a medical certificate may be required)
- Some passport acceptance facilities provide photo services for an additional fee. Most CVS store locations provide these photo services for a fee.

DO NOT attach your photo to the other papers.

6. Bring money to pay the passport fee.

It is \$105 for a Passport Book and \$40 for a Passport Card, or \$120 for a Passport Book and Card. Some offices do not take credit cards or checks, so make sure to bring cash too.

If you are a parent who is applying without the other parent's consent and you don't have sole custody, you must bring and fill out all these papers:

- Complete U.S. Passport Application (Form DS-11).
- Complete Sections 1 through 8 on the Statement of Exigent/Special Family Circumstances (Form DS-5525). If you don't know the answer to a question, write "I don't know."
- If the other parent is not in the child's life, then in Section 7 describe ALL of your efforts to try and find that other parent. You should contact at least 2 different people including friends, family members, former employers, or former landlords to ask for the non-applying parent's current address and write down exactly what each person tells you. You should look on the internet and in telephone directories and write down exactly what you find. If you need more space to describe your attempts to contact the non-applying parent, continue on a separate paper. We understand that it may be difficult to find the non-applying parent, and it is likely you will not be able to find that parent, but it is very important that you show genuine effort to try to find them. If the State Department is not convinced that you made a good faith effort to find the non-applying parent, they will likely reject your application.
- If you currently live in Georgia, you were never married to the child's parent, and the parent never filed an action to legitimate the child, then in Section 8 you should write the following: "I have sole custody of (your child's name) by operation of Georgia law because the child was born out of wedlock and the parent has never legitimated the child. Attached is a copy of O.C.G.A. § 19-7-25 and my child's birth certificate." If applicable also add: "Additionally, I have searched for my child's parent to try to obtain his consent but I have been unable to find him."
- Describe any additional special or emergency circumstances which require the travel in Section 8.
- Attach any additional relevant evidence such as a custody order, death certificate, incarceration order, deportation order, or temporary protective order.
- Make a copy of everything you plan to submit to the Department of State and keep all of those documents together for your records.
- Send the original Passport Application, Issuance of U.S. Passport to Minor, original Statement of Exigent/Family Circumstances, and any additional relevant evidence such as the copy of the Sole Custody Statute (O.C.G.A. § 19-7-25). Attach a copy of your child's birth certificate – do not send the original. Remember; keep a copy of these documents in a safe place.

If both parents are not around (both have been deported or are out of the country), then a trusted person can apply for the child's passport. This person must have a letter from both parents. The letter needs to say that the parents give permission for this person to apply for a passport for the child, and it must be stamped by a notary. You also must include copies of both parents' ID's. When this letter is only from one parent, the trusted person also needs to have a copy of legal papers that say that parent has sole custody.

If the application for the child is denied, contact a lawyer right away. You can apply for an appeal and try again, but you must do it right away. The attorney could also advise you about applying for sole custody if necessary. Please remember to keep copies of all papers you turn into the State Department and keep all letters and papers you get from them.

If your child was born outside the United States:

Please call the embassy or consulate of the country where your child was born and ask what you will need to get a passport for your child. The embassy can help you with your choices and also see if it's possible for your child to have citizenship in both their home country and the U.S.

Other Travel Considerations

If you want the caregiver you choose to travel with your children or arrange their travel, keep your child's birth certificate, passport and copies of any legal papers in a safe place that the caregiver knows about. Even if your children have passports, it is hard to travel as a child without parents and other issues may come up. Any time your child will travel without their parents, an ICE office or airline worker may ask for a letter of consent (a letter saying it is ok for your child to travel with the caregiver). It is very important to talk to the airline and consulate/embassy of your home country, to understand what your child may need in order to travel outside the U.S. The U.S. Customs and Border Protection has a website with lots of helpful information:

<http://www.cbp.gov/travel/international-visitors/know-before-you-go>

and

https://help.cbp.gov/app/answers/detail/a_id/449/kw/449.

See Sample Letter of Consent for International Travel in the Appendix of Forms.

IF YOU ARE DETAINED OR DEPORTED AND YOU WANT YOUR CHILDREN TO **STAY IN THE U.S.**

Education/Enrollment in School

Children have a right to remain in the same school when they have to change homes due to loss of housing, economic hardship, or a similar reason. This means that if you are picked up by ICE and your children have to go stay with a caregiver who does not live in your school district, your children can continue going to their original school. The school should also provide transportation. If the school tells the caregiver that your children can't keep going to their old school, you or the caregiver can dispute that decision.

On the other hand, if you and the children's caregiver decide it would be better for the children to attend a school in the caregiver's district, the caregiver should be allowed to enroll the children in that school, even if the caregiver does not have any formal custody or guardianship order.

Non-Parental Affidavit.

The school district may require the caregiver to complete a Non-Parental Affidavit. In this guide you will find examples of the non-parental affidavits used in Atlanta Public Schools, Cobb County Schools and Gwinnett County Schools. If you live in another place, ask the school district for the form, but remember that the school district **cannot** require custody or guardianship papers.

Kinship Caregiver Affidavit

Additionally, the school district may ask a caregiver to sign a Kinship Caregiver Affidavit. The Kinship Caregiver Affidavit requires a caregiver to list a drivers' license or ID number, and some caregivers may not have this information. However, the Kinship Caregiver Affidavit is not required to enroll a child in school, although it will allow a caregiver to consent to services which usually require parental consent. Those services are:

1. Educational Services;
2. Medical services needed to enroll in school (for example, vaccines/immunizations); and
3. Curricular or extracurricular activities

Provisional Enrollment

If the school district has any questions about a child's eligibility to enroll, the school district is required to provisionally enroll the child for 30 days to allow the caregiver time to resolve the problem without having the child miss school.

Under Georgia law, a person who is caring for a child in their home is required to enroll that child in school. If you or the caregiver have any problems enrolling your children in school, it is important to contact an attorney immediately.

See School Affidavits in the Appendix of Forms

POWER OF ATTORNEY

*(A paper that is an understanding between you and the caregiver in case you are detained or deported.
Power of Attorney lets the caregiver make decisions for your children while you are away.)*

Power of Attorney gives the caregiver temporary authority to make decisions for your children without having to go to court. If you sign a power of attorney, it does not give the caregiver rights as a parent, it just lets them make decisions for the child in case you are unable to because you are detained or deported. You still have your rights as the parent of your child. You can decide if you want the caregiver to make decisions about your children's school, doctor's visits, housing or travel.

In Georgia, power of attorney for the care of a minor child can only be given to a grandparent, step-grandparent, great grandparent or step-great grandparent. If you give power of attorney to someone other than a grandparent, it will not be valid in Georgia. However, if you want someone else to be a caregiver for your children, and you don't want to go to court, you can still write a power of attorney because many places may honor it.

You must make sure that the caregiver you choose is ready to take care of your children even for a long period of time. Make sure they also know that if they decide they cannot be a caregiver any longer, they must tell you right away.

Both parents must sign a power of attorney. But, a parent who has sole custody can fill out a power of attorney without the other parent signing it. If you are a parent with sole custody, you should tell the other parent if you plan to sign a power of attorney before you sign it. Send a letter to them by certified mail, and ask for a return receipt. It is very important to remember that the other parent could say no to the power of attorney you choose and ask the court for a child custody change.

The Grandparent Power of Attorney form and a revocation form (for if you change your mind about the power of attorney) are included in this guide. We are also including a form you can use if you want to give someone other than a grandparent power of attorney. Remember though that this form is technically not valid in Georgia, so if it does not work for your needs you should consult with an attorney about your options.

You should fill out the Power of Attorney and give it to your child's caregiver, your child's school, and your child's doctor. Make sure to keep a copy for yourself.

When you want to change the power of attorney so that the caregiver will not make decisions for your child anymore, you must fill out the revocation form and give it to the caregiver. We recommend sending the revocation form to the caregiver by certified mail, and request a return receipt. Give copies of the revocation form to your child's school, doctor and anyone else who may have had a copy of the power of attorney.

See Power of Attorney forms in the Appendix of Forms.

If You are Detained or Deported and you want your children to remain in the U.S. with a caregiver

Temporary Guardianship

A temporary guardian is a person who you choose to take care of your child while you give up parental rights temporarily. A temporary guardian can be any adult person who is taking care of your child, so long as the adult is not themselves being taken care of by the state or another person. The temporary guardian will take care of your children just like you would. They will make decisions for their health care, where they go to school, and pay for anything the child may need. They will be “standing in your place” as a parent.

The guardian will be under a court order to do everything they can to take care of your child and provide for them in the best way they can. You have the right to choose the temporary guardian. The court can also think about what your child wishes. However, the court makes the final decision. Sometimes, the judge in the probate court will choose someone other than the person you choose, but this does not happen very often. The court might ask the person who is trying to be the temporary guardian to have a criminal or background check. Some courts may require that the guardian has to be a U.S. citizen, permanent resident, or have proof of permanent status in the U.S.

To get a temporary guardian for your children, an adult who is already taking care of your children must file a petition with the probate court. The caregiver must file the petition in the county where they live. If the caregiver does not live in Georgia, they must file the petition in the county where the child is, but the child must be with the caregiver. To be very clear: a person CANNOT have temporary guardianship of a child if that child is not already living with and being cared for by that person.

For a temporary guardianship to work, you will have to give up your parental rights. While the other person has temporary guardianship of your children, the other person will make all decisions for the children, like when you can visit them. A temporary guardianship does not permanently give up your parental rights, but your rights will be “suspended” (put on hold) until the guardianship ends.

You still have to pay to support your child, and the guardian will also pay for the child to keep them healthy and safe. If you or no one else can help support your child, the temporary guardian can take on all the support for the child, which they might want to do so they can add the child to their health insurance. But, it is still your responsibility to support your child with money.

IMPORTANT: If you do not provide support for your children, either financial support or emotional support, you can lose your rights to your children. Please keep in touch with your children and do all you can to provide for your child, even if you are apart.

When the court decides on a temporary guardian, it will remain in effect until:

- the child is 18
- the child is adopted
- the child is emancipated by the court (old enough to be on their own)
- the child dies
- a temporary guardian dies
- letters of guardianship are given to a permanent guardian
- or a court order is made that ends the temporary guardianship.

You can ask the court at any time to end the temporary guardianship. When you file to end it, the court will send a notice to the temporary guardian. If the temporary guardian is ok with it, the court may end the guardianship without a court hearing. But, if the temporary guardian says no within 10 days of the notice and wishes to stay as temporary guardian to the child, the court will hold a hearing to decide what is best for the child. The longer the children are with the guardian can make a difference in how the court decides.

If you do not want to get the court involved, fill out the forms for Power of Attorney for the Care of a Minor Child. Please be aware that in certain situations (like if the caregiver wants to add the child to his or her insurance), only a court-ordered guardianship will work.

The forms that must be filled out to file a Petition for Temporary Letters of Guardianship of a Minor can be found at <http://gaprobate.gov/content/standard-forms> or from your county probate office. Each court may have other forms for you to fill out so make sure to ask.

The form contains a number of papers that the children's parents must sign and have notarized (signed by a notary), and a form that has to be notarized and signed by any child who is over the age of 14. These papers show the court that the parents and child (if over the age of 14) know and approve of the temporary guardian chosen. *Please know that the form cannot be filed with the court until the person who you have chosen to become the temporary guardian takes custody of the child. This means that some of these papers can be filled out at any time, but you might want to make plans to sign the form and the rest of the papers after you are gone, even if you are detained or deported by ICE.*

The temporary guardian CAN NOT:

The temporary guardian will care for the child day-to-day, but a guardian cannot do everything for the child. For example, a guardian cannot mix money intended for the child with their own or get rid of any of the child's money or assets without the court knowing and saying ok. If the child thinks the guardian is denying their rights or not taking care of them, the child can file a petition in the probate court.

Atlanta Legal Aid and Georgia Legal Services Program are great places to call with questions regarding guardianship. If you do not qualify for their services, you may talk to any family lawyer you choose.

How to choose a Guardian

If you think that having a temporary guardian for your child is the best thing to do, the first step is to decide who it will be. The guardian you pick for your children must be someone you trust - they will be acting as a parent to your children. The guardian should be someone who can quickly take care of your children if you are detained or deported.

Think about the choices below:

A Guardian CAN Be:

- A family member
- A friend
- A godparent
- A neighbor

A Guardian CAN NOT Be:

- A minor (someone under 18)
- Incapacitated or Incompetent (a person who cannot take care of him or herself without the help of a guardian due to serious physical, intellectual, or mental disabilities, including severe mental illness.)
- Someone who says they will not serve as a guardian or has other responsibilities that would stop them from being a guardian

A Guardian Will Have the Power to:

- Be in charge of your children's possessions (clothes, toys, books)
- Decide where your children will live
- Bring lawsuits on behalf of your children
- Give the ok for your children's medical treatment

A Guardian Must:

- Respect the rights of your children
- Take care of the support, care, education, health, of your children
- Take care of the child's personal things (clothes, books, toys)
- Save for your children's future needs with any extra money they have
- Within 60 days after appointment and within 60 days after each anniversary date of appointment, file with the court a personal status report concerning the child, including:
 - A description of the child's general condition, changes since the last report, and the minor's needs;
 - All addresses of the child during the reporting period and the living arrangements of the minor for all addresses; and
 - Recommendations for any alteration in the guardianship order;
- Keep the court informed of the guardian's current address
- Act promptly to terminate the guardianship when the child dies, reaches age 18, is adopted, or is emancipated

Important Questions to ask yourself to decide on a guardian:

1. Who is the person you are thinking of?
2. Where do they live? Is it safe for your children there? Will they be able to attend school or go to the doctor from there?
3. Who else lives with them? Are you comfortable with these people? Do you feel comfortable if your children lives with or around them, too?
4. If you are detained, are they able to come and get your children right away?
5. Can they support and care for your children? Can they do so for a long period of time if they need to?

6. If you are detained for a long time, are they financially capable of supporting your children? Is there money that you can arrange to send to help take care of your children? Do you trust them with your money? Remember, unless the person you choose takes responsibility for paying for the care of your children, it will still be your responsibility to provide money for your children's support.

7. Can they provide enough supervision for your children (will there always be someone to watch your children)?

8. Do you trust them to make important decisions about your children's health and care? Will they tell these decisions to others?

9. Will they take care of your children's things (clothes, books, toys)?

10. Can they save and manage money for your children for their future needs?

Make Sure Your Guardian Knows:

- That you would like for them to care of your children if you are detained, and that they say yes to it.
- That they must pick up your children right away if you are detained. If your children are taken into custody of the DFCS, your potential guardian must contact DFCS immediately to demonstrate that they are or should be your children's proper guardian.
- Where your children go to school, and what their medical needs are.
- Where your children's important documentation is kept (copy of birth certificate, custodial power of attorney, identification information, school and medical records), as well as any other emergency contact and important information. You may want to consider giving your children's potential guardian his or her own copies of these documents.

If, after answering all the above questions, you have any doubts about the person you chose to be a potential guardian, you may want to re-think your choice. Remember, you must make sure that the guardian you choose says they are ready, willing, and able to take care of your children, and that they can do so even if you are detained or unable to return to your children for a long time.

Appendix of Forms

The following forms are included for informational purposes and should only be executed after consulting with a lawyer. This manual should in no way replace individualized advice from a trusted lawyer.

SAMPLE LETTER OF CONSENT FOR INTERNATIONAL TRAVEL

To Whom It May Concern:

We/I, _____, are the
_____ (relationship to child) of _____

(Child’s Full Name), who’s date of birth is _____.

We/I acknowledge that our son/daughter is traveling outside the country with
_____ (name of traveling companion), with our permission.

On this trip, the child will be traveling to _____ on the
following dates _____ (date of departure) to
_____ (date of return).

The means of transportation that will be used is as follows: _____

(List airline and flight numbers, cruise lines, etc., or state “by automobile”).

Upon arrival the child will be residing at the following address: _____

Should there be any questions, please contact _____ at

(address and phone number(s)).

Signature: _____ Date: _____

Full Name: _____

Signature: _____ Date: _____

Full Name: _____

SWORN AND AFFIRMED before me on _____ day of _____, 20 _____.

_____, NOTARY PUBLIC.

KINSHIP CAREGIVER'S AFFIDAVIT

Use of this affidavit is authorized by O.C.G.A. Section 20-1-16.

INSTRUCTIONS: Please print clearly.

I hereby certify that the child named below lives in my home and I am 18 years of age or older.

1. Name of child: _____

2. Child's date of birth: _____

3. My full name (kinship caregiver giving authorization): _____

4. My home address: _____

5. I am a kinship caregiver.

6. I have assumed kinship caregiver status because of one or more of the following circumstances (check at least one):

- A parent being unable to provide care due to the death of the other parent;
- A serious illness or terminal illness of a parent;
- The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
- The incarceration of a parent;
- The loss or uninhabitability of the child's home as the result of a natural disaster;
- A period of active military duty of a parent exceeding 24 months; or
- I am unable to locate a parent or parents at this time to notify them of my intended authorization because (list reasons):

_____.

7. Names of parent(s) or legal custodian(s):

8. Address of parent(s) or legal custodian(s):

9. Phone numbers and email addresses of parent(s) or legal custodian(s):

10. Kinship caregiver's date of birth: _____

11. Kinship caregiver's State of Georgia driver's license number or identification cards number:

WARNING: DO NOT SIGN THIS FORM IF ANY OF THE STATEMENTS ABOVE ARE INCORRECT OR YOU WILL BE COMMITTING A CRIME PUNISHABLE BY A FINE, IMPRISONMENT, OR BOTH.

I recognize that if I knowingly and willfully make a false statement in this affidavit, I will be guilty of the crime of false swearing.

(Kinship caregiver's signature)

(Kinship caregiver's printed name)

Sworn to and subscribed before me this
_____ day of _____, _____.

Notary public (SEAL)
My commission expires: _____.

NOTICES:

1. This declaration does not affect the rights of the named child's parent or legal guardian regarding the care, custody, and control of the child and does not mean that the kinship caregiver has legal custody of the child.
2. A person that relies on this affidavit has no obligation to make any further inquiry or investigation.
3. This affidavit is not valid for more than one year after the date on which it is executed.

ADDITIONAL INFORMATION:

TO KINSHIP CAREGIVERS:

1. If the child stops living with you for a period of more than 30 days, you are required to provide notice not later than 30 days after such period to anyone to whom you have given this affidavit as well as anyone of whom you have actual knowledge who received the affidavit from a third party.
2. If you do not have the information in item 11 of the affidavit (State of Georgia driver's license or identification card), you must provide another form of identification such as your social security number.

TO SCHOOL OFFICIALS:

The school system may require additional reasonable evidence that the kinship caregiver resides at the address provided in item 4 of the affidavit.

TO HEALTH CARE PROVIDERS AND HEALTH CARE SERVICE PLANS:

1. No person that acts in good faith reliance upon a kinship caregiver's affidavit to render educational services or medical services directly related to academic enrollment or any curricular or extracurricular activities, without actual knowledge of facts contrary to those stated in the affidavit, shall be subject to criminal prosecution or civil liability to any person, or subject to any professional disciplinary action, for such reliance if the applicable portions of the form are completed.
2. This affidavit does not confer dependency for health care coverage purposes.

GEORGIA GRANDPARENT POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

NOTICE:

(1) THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE GRANDPARENT THAT YOU DESIGNATE (THE AGENT GRANDPARENT) POWERS TO CARE FOR YOUR MINOR CHILD, INCLUDING THE POWER TO: ENROLL THE CHILD IN SCHOOL AND IN EXTRACURRICULAR SCHOOL ACTIVITIES; HAVE ACCESS TO SCHOOL RECORDS AND DISCLOSE THE CONTENTS TO OTHERS; ARRANGE FOR AND CONSENT TO MEDICAL, DENTAL, AND MENTAL HEALTH TREATMENT FOR THE CHILD; HAVE ACCESS TO SUCH RECORDS RELATED TO TREATMENT OF THE CHILD AND DISCLOSE THE CONTENTS OF THOSE RECORDS TO OTHERS; PROVIDE FOR THE CHILD'S FOOD, LODGING, RECREATION, AND TRAVEL; AND HAVE ANY ADDITIONAL POWERS AS SPECIFIED BY THE PARENT.

(2) THE AGENT GRANDPARENT IS REQUIRED TO EXERCISE DUE CARE TO ACT IN THE CHILD'S BEST INTEREST AND IN ACCORDANCE WITH THE GRANT OF AUTHORITY SPECIFIED IN THIS FORM.

(3) A COURT OF COMPETENT JURISDICTION MAY REVOKE THE POWERS OF THE AGENT GRANDPARENT IF IT FINDS THAT THE AGENT GRANDPARENT IS NOT ACTING PROPERLY.

(4) THE AGENT GRANDPARENT MAY EXERCISE THE POWERS GIVEN IN THIS POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD THROUGHOUT THE CHILD'S MINORITY UNLESS THE PARENT REVOKES THIS POWER OF ATTORNEY AND PROVIDES NOTICE OF THE REVOCATION TO THE AGENT GRANDPARENT OR UNTIL A COURT OF COMPETENT JURISDICTION TERMINATES THIS POWER.

(5) THE AGENT GRANDPARENT MAY RESIGN AS AGENT AND MUST IMMEDIATELY COMMUNICATE SUCH RESIGNATION TO THE PARENT, AND IF COMMUNICATION WITH SUCH PARENT IS NOT POSSIBLE, THE AGENT GRANDPARENT SHALL NOTIFY CHILD PROTECTIVE SERVICES OR SUCH GOVERNMENT AUTHORITY THAT IS CHARGED WITH ASSURING PROPER CARE OF SUCH MINOR CHILD.

(6) THIS POWER OF ATTORNEY MAY BE REVOKED IN WRITING BY ANY AUTHORIZING PARENT. IF THE POWER OF ATTORNEY IS REVOKED, THE REVOKING PARENT SHALL NOTIFY THE AGENT GRANDPARENT, SCHOOL, HEALTH CARE PROVIDERS, AND OTHERS KNOWN TO THE PARENT TO HAVE RELIED UPON SUCH POWER OF ATTORNEY.

(7) IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

made this _____ day of _____, ____.

(1) (A) I, _____ (insert name and address of parent or parents), hereby appoint _____ (insert name and address of grandparent to be named as agent) as attorney in fact (the agent grandparent) for my child _____ (insert name of child) to act for me and in my name in any way that I could act in person.

(B) I hereby certify that the agent grandparent named herein is the (place a check mark beside the appropriate description):

- Biological grandparent;
- Stepgrandparent;
- Biological great-grandparent; or
- Stepgreat-grandparent

(2) The agent grandparent may:

- (A) Enroll the child in school and in extracurricular activities, have access to school records, and may disclose the contents to others;
- (B) Arrange for and consent to medical, dental, and mental health treatment of the child, have access to such records related to treatment of the child, and disclose the contents of such records to others;
- (C) Provide for the child’s food, lodging, recreation, and travel; and
- (D) Carry out any additional powers specified by the parent as follows:

(3) The powers granted above shall not include the following powers or shall be subject to the following rules or limitations (here you may include any specific limitations that you deem appropriate):

(4) This power of attorney for the care of a minor child is being executed because of the following hardship (initial all that apply):

- (A) The death, serious illness, or terminal illness of a parent;

- ____ (B) The physical or mental condition of the parent or the child such that proper care and supervision of the child cannot be provided by the parent;
- ____ (C) The loss or uninhabitability of the child's home as the result of a natural disaster;
- ____ (D) The incarceration of a parent; or
- ____ (E) A period of active military duty of a parent.

(5) (Optional) If a guardian of my minor child is to be appointed, I nominate the following person to serve as such guardian: _____
(insert name and address of person nominated to be guardian of the minor child).

(6) I am fully informed as to all of the contents of this form and I understand the full import of this grant of powers to the agent grandparent.

(7) I certify that the minor child is not emancipated, and, if the minor child becomes emancipated, this power of attorney shall no longer be valid.

(8) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. And Section 7801, et seq., I hereby certify that this power of is not executed for the primary purpose of unlawfully enrolling the child in a school so that the child may participate in the academic or interscholastic athletic programs provided by that school.

(9) I certify that, to my knowledge, the minor child's welfare is not the subject of an investigation by the Department of Human Resources.

(10) I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____
Printed Name: _____

Parent Signature: _____
Printed Name: _____

Signed and sealed in the presence of: _____
Notary public
My commission expires _____

The following notice shall be attached to the grandparent power of attorney:

ADDITIONAL INFORMATION:

To the Grandparent designated as attorney in fact (Agent Grandparent):

(1) If a change in circumstances results in the child not living with you for more than six weeks during a school term and such change is not due to hospitalization, vacation, study abroad, or some reason otherwise acceptable to the school, you should notify in writing the school in which you have enrolled the child and to which you have given this power of attorney form.

(2) You have the authority to act on behalf of the minor child until each parent who executed the power of attorney for the care of the minor child revokes the power of attorney in writing and provides notice of revocation to you as provided in O.C.G.A. Section 19-9-128.

(3) If you are made aware of the death of the parent who executed the power of attorney, you must notify the surviving parent as soon as practicable. With the consent of the surviving parent, or if the whereabouts of the surviving parent are unknown, the power of attorney may continue for up to six months so that the child may receive consistent care until more permanent custody arrangements are made.

(4) You may resign as agent by notifying each parent in writing by certified mail or statutory overnight delivery, return receipt requested, and if you become unable to care for the child, you shall cause such resignation to be communicated to the parent. If communication with such parent is not possible, you must notify child protective services or such government authority that is charged with assuring proper care of such minor child.

To school officials:

(1) Except as provided in the policies and regulations of the county school board and the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. and Section 7801, et seq., this power of attorney, properly completed and notarized, authorizes the agent grandparent named herein to enroll the child named herein in school in the district in which the agent grandparent resides. That agent grandparent is authorized to provide consent in all school related matters and to obtain from the school district educational and behavioral information about the child.

Furthermore, this power of attorney shall not prohibit the parent of the child from having access to all school records pertinent to the child.

(2) The school district may require such residency documentation as is customary in that school district.

(3) No school official who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

To health care providers:

(1) No health care provider who acts in good faith reliance on a power of attorney for the care of a minor child shall be subject to criminal or civil liability or professional disciplinary action for such reliance.

(2) The parent continues to have the right to all medical, dental, and mental health records pertaining to the minor child.

GEORGIA GENERAL POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

NOTICE:

(1) THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE CAREGIVER THAT YOU DESIGNATE (THE AGENT CAREGIVER) POWERS TO CARE FOR YOUR MINOR CHILD, INCLUDING THE POWER TO: ENROLL THE CHILD IN SCHOOL AND IN EXTRACURRICULAR SCHOOL ACTIVITIES; HAVE ACCESS TO SCHOOL RECORDS AND DISCLOSE THE CONTENTS TO OTHERS; ARRANGE FOR AND CONSENT TO MEDICAL, DENTAL, AND MENTAL HEALTH TREATMENT FOR THE CHILD; HAVE ACCESS TO SUCH RECORDS RELATED TO TREATMENT OF THE CHILD AND DISCLOSE THE CONTENTS OF THOSE RECORDS TO OTHERS; PROVIDE FOR THE CHILD'S FOOD, LODGING, RECREATION, AND TRAVEL; AND HAVE ANY ADDITIONAL POWERS AS SPECIFIED BY THE PARENT.

(2) CURRENTLY, GEORGIA ONLY LEGALLY RECOGNIZES POWERS OF ATTORNEY GRANTED TO A GRANDPARENT, STEP-GRANDPARENT, GREAT GRANDPARENT, OR STEP GREAT-GRANDPARENT. HOWEVER, IF YOU DO NOT WANT TO GIVE SOMEONE LEGAL CUSTODY AT THIS TIME, THE GENERAL POWER OF ATTORNEY MAY SERVE YOUR NEEDS EVEN IF YOU OR THE CAREGIVER IS NOT A GRANDPARENT SINCE MANY THIRD PARTIES MAY STILL HONOR THE AGREEMENT.

(3) THE AGENT CAREGIVER IS REQUIRED TO EXERCISE DUE CARE TO ACT IN THE CHILD'S BEST INTEREST AND IN ACCORDANCE WITH THE GRANT OF AUTHORITY SPECIFIED IN THIS FORM.

(4) THE AGENT CAREGIVER MAY EXERCISE THE POWERS GIVEN IN THIS POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD THROUGHOUT THE CHILD'S MINORITY UNLESS THE PARENT SPECIFIES A DIFFERENT DURATION, THE PARENT REVOKES THIS POWER OF ATTORNEY AND PROVIDES NOTICE OF THE REVOCATION TO THE AGENT CAREGIVER, OR UNTIL A COURT OF COMPETENT JURISDICTION TERMINATES THIS POWER. THIRD PARTIES ARE CURRENTLY **NOT** LEGALLY REQUIRED TO HONOR POWER OF ATTORNEYS GIVEN TO A NON-GRANDPARENT CAREGIVER IN GEORGIA.

(5) THE AGENT CAREGIVER MAY RESIGN AS AGENT AND MUST IMMEDIATELY COMMUNICATE SUCH RESIGNATION TO THE PARENT, AND IF COMMUNICATION WITH SUCH PARENT IS NOT POSSIBLE, THE AGENT CAREGIVER SHALL NOTIFY CHILD PROTECTIVE SERVICES OR SUCH GOVERNMENT AUTHORITY THAT IS CHARGED WITH ASSURING PROPER CARE OF SUCH MINOR CHILD.

(6) THIS POWER OF ATTORNEY MAY BE REVOKED IN WRITING BY ANY AUTHORIZING PARENT. IF THE POWER OF ATTORNEY IS REVOKED, THE REVOKING PARENT SHALL NOTIFY THE AGENT CAREGIVER, SCHOOL, HEALTH CARE PROVIDERS, AND OTHERS KNOWN TO THE PARENT TO HAVE RELIED UPON SUCH POWER OF ATTORNEY.

(7) IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY FOR THE CARE OF A MINOR CHILD

made this _____ day of _____, ____.

(1) I, _____ (insert name and address of parent or parents), hereby appoint _____ (insert name and address of CAREGIVER to be named as agent) as attorney in fact (the agent CAREGIVER) for my child _____ (insert name of child) to act for me and in my name in any way that I could act in person.

(2) The agent CAREGIVER may:

- (A) Enroll the child in school and in extracurricular activities, have access to school records, and may disclose the contents to others;
- (B) Arrange for and consent to medical, dental, and mental health treatment of the child, have access to such records related to treatment of the child, and disclose the contents of such records to others;
- (C) Provide for the child's food, lodging, recreation, and travel; and
- (D) Carry out any additional powers specified by the parent as follows:

(3) The powers granted above shall not include the following powers or shall be subject to the following rules or limitations (here you may include any specific limitations that you deem appropriate):

(4) This power of attorney for the care of a minor child is being executed because:

(5) (Optional) If a guardian of my minor child is to be appointed, I nominate the following person to serve as such guardian: _____ (insert name and address of person nominated to be guardian of the minor child).

(6) Duration of Power of Attorney:

(A) _____ (Initials) This power of attorney is effective beginning _____, 2 _____ and ending _____

_____, 2_____. I reserve the right to revoke this power and authority at any time OR

(B) _____(Initials) This power of attorney is effective until I revoke this power of attorney.

(7) I am fully informed as to all of the contents of this form and I understand the full import of this grant of powers to the agent CAREGIVER.

(8) I certify that the minor child is not emancipated, and, if the minor child becomes emancipated, this power of attorney shall no longer be valid.

(9) Except as may be permitted by the federal No Child Left Behind Act, 20 U.S.C.A. Section 6301, et seq. And Section 7801, et seq., I hereby certify that this power of is not executed for the primary purpose of unlawfully enrolling the child in a school so that the child may participate in the academic or interscholastic athletic programs provided by that school.

(10) I certify that, to my knowledge, the minor child's welfare is not the subject of an investigation by the Department of Human Resources.

(11) I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____

Printed Name: _____

Parent Signature: _____

Printed Name: _____

Signed and sealed in the presence of: _____

Notary public

My commission expires _____

REVOCATION OF POWER OF ATTORNEY FOR CARE OF A MINOR CHILD

Part I: To be filled out by parent(s) of minor child:

1. Minor Child's Name _____

2. Mother/Legal Guardian's Name & Address _____

3. Father/Legal Guardian's Name & Address _____

4. Caregiver's Name & Address _____

Part II: To be filled out by the parent(s).

I, _____, hereby revoke the Power of Attorney for Care of a
(Name of Parent(s))

Minor Child for the child listed above in Part I, which was previously executed on

_____ and given to _____ to act as said minor child's
(Date) *(Name of Caregiver)*

agent caregiver. All rights, power, and authority previously granted to said agent caregiver pursuant to said Power of Attorney for Care of a Minor Child are hereby revoked, effective immediately. I have sent a copy of this revocation to the agent caregiver by certified mail or statutory overnight delivery, return receipt requested, and upon receipt of the revocation, the agent caregiver shall cease to act as agent. I have also sent copies of the revocation to the child's

school, health care provider, and all others known to me to have relied upon such power of attorney.

IN WITNESS WHEREOF, I/We sign this Revocation of Power of Attorney for Care of a Minor Child and declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct.

Parent Signature: _____
Printed Name: _____

Parent Signature: _____
Printed Name: _____

Signed and sealed in the presence of: _____
Notary public
My commission expires _____



NON-PARENTAL AFFIDAVIT

Pursuant to Board Policy JBCA, Resident Student and Administrative Regulation JBC-R, Student Admissions, this Affidavit shall be completed during enrollment and/or re-enrollment in Atlanta Public Schools. This Affidavit shall be completed for students living in the City Atlanta Public Schools System, but who are residing with a person who is not the parent, legal guardian or grandparent. This Affidavit shall be completed by the adult with whom the student is living. This affidavit should not be utilized for Homeless students. Please see Board Policy JBC(1) and Administrative Regulation JBC(1)-R, Homeless Students.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein. The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

Name of Non-Parent: _____
Address: _____
City: _____ State: **GEORGIA** Zip: _____
Home Phone: _____ Work Phone: _____
Cellular Phone: _____ Other: _____

1. Reason the student is living with the above named adult (check one):

- A. The death, serious illness, or incarceration of a parent or legal guardian.
- B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
- C. Abuse or neglect by the parent or legal guardian.
- D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
- E. The loss or inhabitability of the student's home as the result of a natural disaster.
- F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
- G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
- H. The parents cannot be located.
- I. Other circumstances as approved by the school system (explain below).

2. The name and last known address of the child's parent(s) or legal guardian is: _____

3. I assumed control and charge of this child, which I provide 24 hours per day and 7 days per week, on _____ (day/month/year).

4. The name and address of the last school that the child attended is: _____

5. The school system's superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system. The audit may also include a personal visit by a school district attendance officer or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school.

6. I attest that this request to attend an Atlanta Public School is not primarily related to attendance at a particular school in Atlanta Public Schools, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.

7. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

8. I further attest that I have been given the responsibility for educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.

9. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.

10. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

NOTICE OF PENALTIES AND LIABILITY

I understand that: **(Please initial each paragraph)**

_____ 1. If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133 (a).

_____ 2. If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same.

_____ 3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1.

_____ 4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2.

_____ 5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20.

_____ 6. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71.

_____ 7. By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions.

I solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief. I understand that the student is conditionally enrolled for 30 days and this Affidavit is valid for 30 days to allow me to procure a Legal Guardianship for the above minor child. If guardianship is not presented within 30 days, school may withdraw the student.

Signature of adult with whom the child is living

Date

Sworn to and Subscribed before me

this _____ day of _____ 20 _____

Notary Public
My Commission Expires: _____

Guardianship can be obtained by contacting the Fulton County Probate Court located at 136 Pryor Street, Room C-230, Atlanta, Georgia 30303, (404-730-4697). Information regarding this process is also available online at www.gaprobate.org. The Court may require a fee for this process, but no fee will be required if an affidavit of indigence is filed with the Court (See O.C.G.A. § 15-9-61). For persons seeking guardianship of students in their care, the guardian must be an adult of at least 18 years of age or an emancipated minor at least 16 years of age residing within the boundaries of Atlanta Public Schools. The District may object to petitions of guardianship through the court system.

NON-PARENTAL AFFIDAVIT

This form must be fully completed.

Please Print or Type

THIS FORM SHALL BE COMPLETED BY AN ADULT WITH WHOM THE STUDENT IS LIVING.

This form shall be completed for students living in the Cobb County School District (District) who do not live in the home of their parents or guardian.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

My Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

1. Reason the student is living with the above-named adult (check at least one)
 - A. The death, serious illness, or incarceration of a parent or legal guardian.
 - B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
 - C. Abuse or neglect by the parent or legal guardian.
 - D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
 - E. The loss or inhabitability of the student's home as the result of a natural disaster.
 - F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
 - G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
 - H. The parents cannot be located.
2. The name and last known address of the child's parent(s) or guardian is:

3. I assumed control and charge of this student, which I provide 24 hours per day and 7 days per week, on _____
(day/month/year)
4. The name and address of the last school that the child attended is:

5. The School District's Superintendent, or his/her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the District. The audit may also include a personal visit by a District attendance officer or other employee of the District at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the District discovers fraud or misrepresentation, student shall be withdrawn from school.
6. I attest that this request to attend the Cobb County School District is not primarily related to attendance at a particular school in the Cobb County School District *nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.*
7. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

8. I further attest that I have been given the responsibility for educational decisions for the student including, but not limited to, receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.
9. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I have made every effort to secure that signature.
10. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the Cobb County School District.

NOTICE OF PENALTIES AND LIABILITY:

I understand that:

1. If I falsify information or defraud the Cobb County School District on this affidavit, I will be obligated to pay for the costs incurred by the District for the period during which the ineligible student is enrolled, and shall remunerate the District as set forth in O.C.G.A. § 20-2-133 (a). _____
(initial)
2. If the costs incurred by the District are collected by an attorney, I will be obligated to pay for all expenses and attorney’s fees incurred by the Board of Education in the collection of same. _____
(initial)
3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1. _____
(initial)
4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2. _____
(initial)
5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20. _____
(initial)
6. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71. _____
(initial)
7. By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions. _____
(initial)

I SOLEMNLY AFFIRM UNDER THE PENALTIES LISTED ABOVE THAT THE CONTENTS OF THIS AFFIDAVIT ARE TRUE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Signature of affiant (adult with whom the child is living)

Signature of parent/guardian (if available)

<p>PLEASE NOTARIZE</p> <p>Sworn to and subscribed before me this ____ day of _____, 20____.</p> <p>Notary Public: _____</p>	<p>Name of Affiant (Adult with whom the child is living) (Please Print): _____</p> <p>Enrolling Person Signature: _____</p> <p>Principal/Designee Signature: _____</p>
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GWINNETT COUNTY PUBLIC SCHOOLS NON-PARENTAL AFFIDAVIT

This Affidavit shall be completed for students living in the Gwinnett County Public School System, but who are residing with a person who is not the parent or legal guardian. This Affidavit shall be completed by the adult with whom the student is living. This Affidavit should not be utilized for Homeless students.

The school system's superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____, and whose birth date is _____, is living with me at the following address:

Name of Non-Parent: _____ Address: _____

City/State/Zip: _____ Home Phone: _____

Work Phone: _____ Cell Phone: _____

1. Reason the student is living with the above named adult (check one).
 - a. The death, serious illness, or incarceration of a parent or legal guardian.
 - b. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
 - c. Abuse or neglect by the parent or legal guardian.
 - d. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
 - e. The loss or inhabitability of the student's home as the result of a natural disaster.
 - f. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
 - g. The parents cannot be located.
 - h. Other circumstances as approved by the school system (explain below).

District explanation: _____

2. The name and last known address of the child's parent(s) or legal guardian:

3. I assumed control and charge of this child, which I provide 24 hours per day and seven days per week, on (month/day/year). _____

4. The name and address of the last school that the child attended:

5. I attest that this request to attend a Gwinnett County Public School is not primarily related to attendance at a particular school in Gwinnett County, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.
6. I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.
7. I further attest that I have been given the responsibility for educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school-related activities, and taking appropriate action in connection with student records.
8. If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.
9. I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

Signature of affiant (adult with whom the child is living) Signature of parent/legal guardian (if available)

NOTICE OF PENALTIES AND LIABILITY

I understand that:

1. If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133(a).
2. If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney's fees incurred by the Board of Education in the collection of same.
3. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1.
4. I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2.

5. I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20.
6. I may be prosecuted, held criminally liable and punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of fast swearing pursuant to O.C.G.A. § 16-10-71.

By signing on the line provided below, I _____ affirm that I have read and understand each of these provisions listed above.

I _____ solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of affiant (adult with whom the child is living)

Signature of parent/legal guardian (if available)

State of Georgia, County of Gwinnett

I, _____, a Notary Public for said county and state, do hereby certify that _____ personally appeared before me this day and acknowledged the due executing of this foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, _____.

My commission expires _____, _____

Signature of Notary Public

Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.

Appendix G: Non-Parental Affidavit of Residence Sample Form

NON-PARENTAL AFFIDAVIT OF RESIDENCE

This form shall be completed for students living in _____ County/City School System, but not living in the home of the parents or legal guardian.

This form shall be completed by an adult with whom the student is living.

I, the undersigned, am over eighteen (18) years of age and competent to testify to the facts and matters set forth herein.

The student whose legal name is _____ and whose birth date is _____ is living with me at the following address:

Name: _____

Address: _____

City: _____, State, _____, Zip _____

Home Phone: _____ Work Phone: _____

Cellular Phone: _____

Reason the student is living with the above named adult (check one)

- A. The death, serious illness, or incarceration of a parent or legal guardian.
- B. The abandonment by a parent or legal guardian of the complete control of the student as evidenced by the failure to provide substantial financial support and parental guidance.
- C. Abuse or neglect by the parent or legal guardian.
- D. The physical or mental condition of the parent or legal guardian is such that he or she cannot provide adequate care and supervision of the student.
- E. The loss or inhabitability of the student's home as the result of a natural disaster.
- F. The parent or guardian is unable to provide care and supervision of the student because he or she is serving in the military.
- G. The student is living in a foster home, group home, or other institution or care facility that is located in the county.
- H. The parents cannot be located.
- I. Other circumstances as approved by the school system (explain below).

District explanation: _____

The name and last known address of the child's parent(s) or legal guardian is:

I assumed control and charge of this child, which I provide 24 hours per day and 7 days per week, on _____ (day/month/year).

The name and address of the last school that the child attended is:

**Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.**

The school system’s superintendent, or his or her designee, may verify the facts contained in this affidavit and conduct an audit on a case-by-case basis after the child has been enrolled in the county public school system. The audit may also include a personal visit by a school district attendance officer or other employee of the district at the residence provided in this affidavit to verify the facts sworn to in this affidavit. If the superintendent discovers fraud or misrepresentation, the child shall be withdrawn from school.

I attest that this request to attend a _____ County/City school is not primarily related to attendance at a particular school in _____ County/City, nor is this affidavit being completed for the purpose of participating in athletics at a particular school, taking advantage of special services or programs offered at a particular school, or for any other similar purpose.

I further attest that the student named above is not now under a long-term suspension or expulsion from his/her most recent school nor is currently subject to a recommendation for long-term suspension or expulsion for his/her most recent school.

I further attest that I have been given the responsibility for making educational decisions for the child, including receiving notices of discipline, attending conferences with school personnel, granting permission for school related activities, and taking appropriate action in connection with student records.

I further attest that I have been given the responsibility for making medical decisions and consenting to any surgical or medical treatment or procedures.

If the parent, guardian, or legal custodian is unable, refuses or is otherwise unavailable to sign this form, I, as the adult with whom the child is living, have made every effort to secure this and they are unable or refused to adhere to this request.

I understand that if any of the information provided on this affidavit is changed for any reason, it is my responsibility to immediately notify the school system.

NOTICE OF PENALTIES AND LIABILITY:

I understand that:

If I falsify information or defraud the school system on this affidavit, I will be obligated to pay for the costs incurred by the local school system for the period during which the ineligible student is enrolled, and shall remunerate the local school system as set forth in O.C.G.A. § 20-2-133 (a).

_____ (initial)

If the costs incurred by the local school system are collected by an attorney, I will be obligated to pay for all expenses and attorney’s fees incurred by the Board of Education in the collection of same. _____ (initial)

I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than ten years if I am found guilty of forgery in the first degree, pursuant to O.C.G.A. § 16-9-1. _____(initial)

**Georgia Department of Education
Guidance for State Board of Education Rule
160-5-1-.28 STUDENT ENROLLMENT AND WITHDRAWAL.**

I may be prosecuted, held criminally liable, and imprisoned for not less than one nor more than five years if I am found guilty of forgery in the second degree, pursuant to O.C.G.A. § 16-9-2. ____ (initial)

I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not more than one nor more than five years, or both, if I am found guilty of making false statements pursuant to O.C.G.A. § 16-10-20. _____ (initial)

I may be prosecuted, held criminally liable, and punished by a fine of not more than \$1,000.00 or by imprisonment for not less than one nor more than five years, or both, if I am found guilty of false swearing pursuant to O.C.G.A. § 16-10-71. _____ (initial)

By initialing on the lines provided next to each of the items listed above, I affirm that I have read and understand each of these provisions.

I solemnly affirm under the penalties listed above that the contents of this affidavit are true to the best of my knowledge, information, and belief.

Signature of affiant (adult with whom the child is living)

Signature of parent/legal guardian

State of: _____ County of: _____

I, _____, a Notary Public for said county and state, do hereby certify that _____ personally appeared before me this day and acknowledged the due executing of the foregoing instrument.

Witness my hand and official seal, this the _____ day of _____, 2____.

My commission expires _____, 2____

Signature of Notary Public

