Certification of Civil Status

I certify under the penalty of perjury (a first degree misdemeanor punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding $1,000 pursuant to s. 837.012, or 775.082, or 775.083, F.S.) I have been living as separated from my husband/wife or significant other (print legal name)______________________________ since_____/_____/_____.

I certify he/she is not a member of my household and I receive weekly/monthly assistance from him/her for my family in the amount of_____________________.

If at any time my civil status changes, I will notify the Early Learning Coalition of Seminole within ten (10) calendar days or my childcare may be denied or terminated. I understand that if it is discovered that I have not been truthful with this information that I may be prosecuted for fraud. I may be required to pay back financial assistance received for the above child from the county, state, or federal government if the child is determined ineligible.

__________________________________________  __________________________________________
Name of Parent/Guardian                        Name of Children

__________________________________________  __________________________________________
Parent/Guardian Signature                       Date

STATE OF FLORIDA, County of ______________________
Sworn to (or affirmed) and subscribed before me this_______day of_______________, 20_____, by

__________________________________________
Name of person making statement

Notary Seal                                    Signature of Notary Public-State of Florida

☐ Personally Known, -OR-
☐ Produced Identification

Type of ID Produced: _____________________________________________________________