

**Coeur d’Alene School District No. 271**

**STUDENTS**

**3040F2**

Educational Neglect Affidavit

In the Interest of: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 DOB: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 DOB: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 DOB: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 DOB: \_\_\_\_\_ )  
 \_\_\_\_\_ )  
 A Child/Children Under Sixteen )  
 Years of Age \_\_\_\_\_ )

**AFFIDAVIT  
 IN SUPPORT OF FINDING  
 “EDUCATIONAL NEGLECT”**

**(Exhibit 2)**

STATE OF IDAHO )  
 County of Kootenai )

I, \_\_\_\_\_, being first duly sworn, affirm and say:

1. That I am a \_\_\_\_\_ with \_\_\_\_\_ school, District 271, in Kootenai County Idaho, and I have personal knowledge regarding the child/children and the information contained in this affidavit;
2. That the child/children have been enrolled in \_\_\_\_\_ school since \_\_\_\_\_, 20\_\_\_\_, and I am personally familiar with his/her/their educational situation;
3. That the above-named child/children have/has been subjected to educational neglect by the parent(s) or guardian(s) as evidenced by:
  - Failure to enroll the child/children, who is/are of compulsory school age, in school;
  - Permitting or excusing chronic or habitual truancies;
  - Not attending to the child/children’s special educational needs;
  - Failing to have the child comparably instructed as the child would be in public or private school;
  - Other: \_\_\_\_\_;
4. The risk factors associated with educational neglect for the child are: reduced academic achievement, reduced social interaction with peers, greater exposure to inappropriate

supervision, greater exposure to drug and delinquent behavior, future reduction in possible career opportunities and wages/salaries, increased risk for unemployment and need for welfare; and greater risk for failing to reach age-appropriate milestones; and

5. That the above-named child(ren) is/are in need of the following intervention for his/her/their well-being: A court-ordered investigation to be conducted by the Idaho Department of Health and Welfare, Child Protection Services and/or criminal proceedings brought against the parent(s) or guardian(s)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Affiant: \_\_\_\_\_

SUBSCRIBED AND SWORN before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public for the State of Idaho

Commission Expires: \_\_\_\_\_