

**脫離家長監管證明書/AFFIDAVIT OF EMANCIPATION**

學生姓名/Name of Student \_\_\_\_\_ 出生日期/Date of Birth \_\_\_\_\_

不與父母同住的原因/Reason for Not Living with Parents \_\_\_\_\_

\_\_\_\_\_

獲得支援的途徑/Mean of Support \_\_\_\_\_

家長是否提供經濟支援/Receiving Financial Support from Parent(s)?  是/YES  NO/否

與家長目前的關係（最後一次見面、聯絡過、是否知道家長目前在哪裏等）/Current Relationship to Parents (last seen, contacted, knowledge of whereabouts, etc.)

\_\_\_\_\_

其他與學生目前情況有關的事實/Other Facts Relevant to Student's Status

\_\_\_\_\_

本人特此證明我是一名脫離家長監管的未成年人。/I hereby affirm that I am an emancipated minor.

學生簽名/Signature of Student \_\_\_\_\_

STATE OF NEW YORK \_\_\_\_\_ )

COUNTY OF \_\_\_\_\_ ) SS:

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ Year

\_\_\_\_\_  
Notary Public