



O.C.G.A. § 50-36-1(e)(2) Affidavit of NO ABUSE

By executing this affidavit under oath, as an applicant for employment with **PERENNIAL ANGELS HOMECARE**, a Private Home Care Provider, licensed by the Department of Community Health, State of Georgia, as referenced in O.C.G.A. § 50-36-1, the undersigned applicant verifies the following with respect to application for employment:

I have never been shown by credible evidence (e.g. a court or jury, a department investigation, or other reliable evidence) to have abused, neglected, sexually assaulted, exploited, or deprived any person or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in _____ (city), _____ (state)

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
___ DAY OF _____, 20___

NOTARY PUBLIC
My Commission Expires: _____