



### Affidavit for Bankruptcy Education

My full legal name is \_\_\_\_\_  
(First) (Middle) (Last) (Jr. Sr.III)

My current address is \_\_\_\_\_  
Street City State Zip

My email address is \_\_\_\_\_

Daytime phone number \_\_\_\_\_ Evening phone number \_\_\_\_\_

My attorney is \_\_\_\_\_

My attorney's address is \_\_\_\_\_

My attorney's phone number is \_\_\_\_\_ **Bankruptcy Case#** \_\_\_\_\_

My attorney's email address is \_\_\_\_\_

In person registration: State or government issued picture ID presented and verified.

Registration by fax or mail: **A copy of your state or government issued picture ID must accompany this form.**

**You must have your attorney sign this form. If you do not have an attorney, please have your signature notarized.**

**Fax Affidavit to 661-324-0750 or mail to CCCS, 5300 Lennox Avenue, Suite 200, Bakersfield, CA 93309.**

**Before we can enroll you in the Education Program, we must receive this Affidavit, a copy of your ID, your \$50 fee**

**(by mail or pay online at [www.californiaccs.org](http://www.californiaccs.org) and your signed Bankruptcy Education Disclosure.**

**By signing this form you certify the following:**

**I certify that all the information on this affidavit is true, correct and complete and made in good faith. I also certify that I personally will complete the education program. I understand that knowingly making a false or fraudulent statement or misrepresentation about my identity or completion of the education program is a violation of the requirements of Federal law.**

I wish to have my education certificate emailed directly to my attorney.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's signature

\_\_\_\_\_  
Date

*(Below this line is for the Notary)*

State of \_\_\_\_\_, County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_.

\_\_\_\_\_  
My Commission Expires (Notary Seal)

\_\_\_\_\_  
Notary Public (print or stamp name of notary)

Personally known \_\_\_\_\_

Or Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_