



Affidavit of Student Residency 2019-2020

Student's Name(s) and Grade(s): _____ Grade: _____
_____ Grade: _____
_____ Grade: _____
_____ Grade: _____

This form is to be completed in the presence of a Notary Public in the following residency cases (please check which applies):

- Student and legal guardian reside with a friend or relative
Student lives with someone other than the legal guardian. Provide a brief explanation: _____

The lessee/property owner with whom the student resides must attach two forms of proof of residency. The documents must be in the lessee/property owner's name and must match the address where the student resides.

Acceptable documents are:

Table with 2 columns: Residents name and address must appear on the document; Other:
List of acceptable documents including Mortgage Statement, Real Estate Tax Bill, Utility Bill, Vehicle Registration, Homeowner's/Renter's Insurance, and Lease or Rental Agreement.

Illinois law has made it a crime to knowingly or willfully present any false information regarding the residency of a student for purposes of enabling the student to attend on a tuition-free basis or knowingly enroll or attempt to enroll a student when the student is a non-resident of the School District.

- Notified of the student's immediate removal from school
Charged the current tuition fee per child per day of attendance
Reported to the authorities for legal action

By signing below, I hereby acknowledge that the information contained in this form is true and correct.

(TO BE COMPLETED BY THE LEGAL GUARDIAN):

Address Where Student(s) Resides _____ City _____ State _____ Zip Code _____
Legal Guardian Lives Here Too? ___ Yes ___ No Legal Guardian Phone Number: _____ - _____ - _____
Legal Guardian Name _____ Legal Guardian Signature _____ Date ____/____/____

(TO BE COMPLETED BY THE LESSEE/PROPERTY OWNER):

Lessee/Property Owner Name _____ Lessee/Property Owner Signature _____ Date ____/____/____

(TO BE COMPLETED BY A NOTARY PUBLIC):

Sworn to and ascribed in my presence this _____ day of _____ 20_____.

Stamp of Seal:

Notary Public Name _____

Notary Public Signature _____