

Maine Township High School District 207

1177 South Dee Road • Park Ridge, Illinois 60068-4398 • (847) 696-3600 • FAX (847) 692-8007

Dr. Tatiana Bonuma Superintendent Effective July 1, 2024 District 207 Administration Center

FORM #3: RESIDENCY AFFIDAVIT FOR NON-PARENT / NON-LEGAL GUARDIAN WITH WHOM A STUDENT RESIDES

Today's date:				
Student Information				
Last Name	First Name		Birthdate	School ID Number
Last Name	First Name		Birthdate	School ID Number
This affidavit is to be completed each year student resides and who is attempting to eentirety. If an item does not apply, write transferring legal custody or control from the Person enrolling student	nroll the student in s "N/A" in the spac	school. All sect e provided. Att	ions of this form mach copies of any o	nust be completed in its
First Name		Last Name		
Address		Phone Number		
Step 1: General Information				
What is your relationship to the student?				
2. Why is the student living with you? (Expla	ain)			
3. On what date did the student begin to live	e with you?			
4. How long is the student expected to be li	ving with you?			

5. Does the student live with you on a full Yes No If no please explain and provide the add	l-time basis? dress(es) where the student stays when th	ey are not living with you:
	and the stade in stays when the	
6. Do any other person or person(s) exer	cise care, custody or control of the studen	it other than yourself? Explain:
7. Does the student have any contact or	visitation with one or both of their parents?	? (Explain)
8. Do the student's parents/guardians proparents provide support and the amount	ovide any financial support for the student of support provided:	? If so, describe for what expenses the
9. Does the student have a key to your heave a		
11. If the student or the person completin automobile(s) registered:	g this affidavit has or uses an automobile,	at what address(es) are the
Automobile License Plate Number	Make and Model of Automobile	Address to Which it is Registered
12. Who claims the student as a dependence Parents Resident	ent for tax purposes?	
13. Who is responsible for authorizing me Parents Resident	edical treatment for the student?	

14. Who should receive the student's report card?
☐ Parents
Resident
15. Please provide any additional information which may help to establish the student's residency:
Step 2: Affirmation and Warning and Affidavit
Please read the following statements, initial each , and sign below.
I affirm that the information presented in this affidavit, and that is or will be presented in connection with any investigation of my residency or the residency and custody of the student, is true, complete, and accurate.
I understand that knowingly or willfully providing false information to a School District regarding the residency of a child for the purpose of enabling that child to attend any school in that District without the payment of nonresident tuition is Class C misdemeanor.
I understand that knowingly enrolling or attempting to enroll a child in the school of a School District on a tuition-free basis when I know the child to be a nonresident of the School District, unless the nonresident child has a lawful right to attend, is a Class C misdemeanor and I will be liable for payment of tuition, fees, and all other applicable fines.
I understand the school district reserves the right to verify residency at any point throughout the year.
Person Enrolling Student (Signature)
Person Enrolling Student (Print Full Name)
Date

(Note: This affidavit must be submitted with a signed and notarized "Affidavit") - see next page

AFFIDAVIT

The undersigned, being first duly sworn, affirms that the answers and documents provided in connection with the foregoing Residency Affidavit for Non-Parent/Non-Legal Guardian With Whom a Student Residear complete, true, and correct. I acknowledge that misrepresentation or providing incorrect or incomplete information may result in the disenrollment of the student from school, my being subject to the payment of tuition for any period of time that the student was not a resident of the District entitled to attend school on a tuition-free basis, and/or referral to proper law enforcement authorities for prosecution under any applicable criminal laws.

(Signature)

(Full Name - print)

(Street Address)

(City, State, Zip Code)

(Phone Number)

SUBSCRIBED TO AND SWORN Before Me this _____ day of _____, 20___.

(Notary Public)