

**COMMUNITY CONSOLIDATED SCHOOL DISTRICT 21
VERIFICATION OF RESIDENCY AND ENROLLMENT**

Today's Date: _____

Child's Name: _____

Birthdate: _____

I, _____, live at _____
Name of Adult *Address*

Which is located within the boundaries of School District 21.

Step 1: Residency Verification (Part A)

Do you: Own your own home Rent Other: _____
 Residency Provided by: _____
Relationship to Child

You must provide documentation showing you **live at** the address listed above. Please check and attach a copy of three (3) of the following documents. You should black out account and social security numbers on the documents. If you cannot produce all three (3) documents, skip to Residency (Part B).

All documents must be current and show your name and address.

You must provide one (1) document from Category A **and** two (2) documents from Category B.

| <i>Category A – One (1) document</i> | <i>Category B – Two (2) documents</i> | |
|--|--|--|
| <input type="checkbox"/> Real estate tax bill | <input type="checkbox"/> Gas bill | <input type="checkbox"/> Public aid card |
| <input type="checkbox"/> Signed lease | <input type="checkbox"/> Electric bill | <input type="checkbox"/> Medicaid card |
| <input type="checkbox"/> Mortgage document or payment book | <input type="checkbox"/> Water/Sewer bill | <input type="checkbox"/> Food stamp card |
| <input type="checkbox"/> Military housing letter | <input type="checkbox"/> Cable bill | <input type="checkbox"/> Credit card statement |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Vehicle registration | <input type="checkbox"/> Paycheck stub |
| | <input type="checkbox"/> Bank statement | <input type="checkbox"/> City sticker receipt |
| | <input type="checkbox"/> Driver's license/State ID | <input type="checkbox"/> Other: _____ |

The district may require a home visit and/or additional documentation to verify residency.

Step 1: Residency Verification (Part B)

I am unable to provide three (3) of the above documents because: (check all that apply)

Our family has not had a permanent residence since ___/___/___.

Address of last permanent residence: _____

Last school attended: _____

- | | |
|---|---|
| <input type="checkbox"/> Living in a shelter | <input type="checkbox"/> Sharing housing with others due to loss of housing, economic hardship, or similar reason |
| <input type="checkbox"/> Living at a train or bus station, park or in a car | <input type="checkbox"/> Abandoned apartment/building |
| <input type="checkbox"/> Living in a hotel, motel, campground, or other similar situation | <input type="checkbox"/> Disaster victim (indicate type): _____ |
| <input type="checkbox"/> Unaccompanied youth | <input type="checkbox"/> The child is temporarily housed, waiting DCFS permanent foster care placement |

Other _____

Your child may qualify for additional services – please ask the registration staff for more information or contact the District's McKinney-Vento Liaison at 847-520-2727.

Please indicate any social service agency you are currently working with: _____

VERIFICATION OF RESIDENCY AND ENROLLMENT (Side 2)

Today's Date: _____

Child's Name: _____

Birthdate: _____

Step 2: Relationship to Student

As required by the state, you must provide a certified, original birth certificate. A copy will be made and the original returned to you. If the birth certificate is not available at the time of registration, other proof of the child's identity and date of birth is required, along with a signed affidavit.

Check one below:

- I am the natural or adoptive parent listed on the birth certificate. Please provide custody agreement, if applicable.
- I was granted court-ordered guardianship (provide copy of court document).
- I receive public aid on behalf of the child (provide copy of documentation showing receipt of aid).
- I have assumed and exercise responsibility for the child and provide him/her with a fixed, nighttime abode. **Please check each of the following boxes to be true and accurate.**
- The child is living with me because _____
- I am at least 18 years of age.
- The child eats and sleeps at my residence on a regular basis.

(This proof of relationship form attests that the above child is not enrolled in the District solely for school purposes and is living on a permanent basis with the person having complete custody and control. Registration of a student who is not a resident is a fraudulent act subject to the payment of retroactive tuition charged for non-resident students, not to exceed 110% of the per capita cost, and possible legal charges being filed. The School District reserves the right to evaluate the evidence presented.)

Step 3: AffirmationPlease read the following statements and **initial each**:

_____ I affirm that the information presented in this verification form, 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 a 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.

_____/_____/_____
Date

Adult (Signature)

Adult (Print Name)

FOR OFFICE USE ONLY

_____/_____/_____
Date

Enrollment Personnel (Signature)

School Building

Form Complete Form Incomplete