

LOCKPORT SCHOOL DISTRICT 91 Legal Custody / Affidavit of Residence Form

TO BE COMPLETED BY D91 RESIDENT EXERCISING RESIDENTIAL CUSTODY OF STUDENT

This form is required to be completed and notarized for all new students!

Student Name:	Birthdate	Grade
Student's Primary Address:		
Does the student do the following at the provided in-	district address?	
Takes all meals: xYes xNo Sleeps regularly(incluidin	g weekends/summers): xYes xNo Keeps personal bel	ongings: ×Yes ×No
Warning and Affirmation: Generally, Illinois law permits only students who are residents of Loaw, the primary legal custodian must provide the child with a fixed District. The person claiming legal custody must also reside in the enrollment and require the involved persons to provide additional is and attendance will not be permitted until all residency issues are form and have it notarized to update records.	I nighttime dwelling for purposes other than to have access to the School District. The School District may investigate the resident of promation to be considered by the District in determining resident	ne educational programs of this by of any student before or after ency. Enrollment is incomplete,
Custodian 1:	Relationship to Student:	
Address:	Phone	DOB
Grounds for Legal Custody: × Natural or adoptive	e residential parent x Natural or adoptive nonres	idential parent
× Court-appointed guardian (order required) × DCFS	-appointed guardian × Other:	
Custodian 2:	Relationship to Student:	
Address:	Phone	DOB
Grounds for Legal Custody: × Natural or adoptive		
· · Court-appointed guardian (order required) × DCFS		-
Is there a child custody or visitation agreement in pla If yes, please provide information related to the child Is the child currently homeless? *Yes *No	's residential schedule (or attach relevant document Has the child been emancipated or over the a	ge of 18? ×Yes ×No
Is either custodian deployed or preparing to deploy d	uring the SY as an active member of the U.S. Arme	d Forces? ×Yes ×No
I/We affirm that I/we reside within the Lockpopresented in this affidavit is true, complete, an misrepresentation of residency information is a crime understand that the School District will seek prosecut committed any residency-related crime. Additionally, a disenrollment of the student named on this form from of time that the student was not a resident of the school triangle.	d accurate. We further understand that knowing of punishable by imprisonment and/or a fine in Illinois ion to the full extent of the law of any person who hany residency misrepresentation on our/my part will be subject to the payment	or willful s. In addition, we the District believes has I result in the immediate
SUBSCRIBED AND SWORN to before		
me this day of, 20	Signature of Person with Legal Custody of Student	Date
	Signature of Person with Legal Custody of Student	Date

Notary Public