



4. Does the student live with you? \_\_\_\_\_
- what portion of the time does the student with with you? \_\_\_\_\_
  - how many nights per week or month? \_\_\_\_\_
  - what days of the week or month? \_\_\_\_\_
  - what weeks or months of the year? \_\_\_\_\_
  - does the student live with you during school holidays and breaks? \_\_\_\_\_
  - for the times the student is not living with you, where and with whom is the student living?  
\_\_\_\_\_
  - who else resides with you and what is each person's relationship to the student? \_\_\_\_\_  
\_\_\_\_\_
5. Describe the student's typical morning routine on school days (including where and when student wakes up and how the student gets to school):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Describe the student's typical after school/evening routine (including where the student goes after school, how the student gets there, and when and where the student eats dinner and sleeps):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. At what address(es) are the student's clothes kept? \_\_\_\_\_  
\_\_\_\_\_
8. At what address(es) are the student's other belongings kept? \_\_\_\_\_  
\_\_\_\_\_
9. Indicate where the student resides during the following times of the year:
- weekends: \_\_\_\_\_
  - winter vacation: \_\_\_\_\_
  - spring vacation: \_\_\_\_\_
  - school holidays: \_\_\_\_\_
  - summer vacation: \_\_\_\_\_

10. Give each address at which the student has resided during the last five (5) years, the periods of time the student resided at each address, the individuals who also resided at the address at that time, and the reason(s) for leaving:

Address	Dates Resided at Address and Who Also Resided at Address	Reason(s) for Leaving

11. Do you currently own or rent a place of residence? \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_
- Please give address: \_\_\_\_\_
  - If you are renting, please provide the name and address of landlord, and provide a copy of your lease: \_\_\_\_\_  
\_\_\_\_\_
  - If you neither own nor rent your place of residence, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Who provides the student's living expenses and costs? \_\_\_\_\_  
\_\_\_\_\_
- if living expenses and costs are shared, please indicate the arrangements for sharing such expenses: \_\_\_\_\_  
\_\_\_\_\_
13. Who is responsible for the discipline and control of the student? \_\_\_\_\_  
\_\_\_\_\_
14. Who is responsible for any damages caused by the student? \_\_\_\_\_  
\_\_\_\_\_

15. In the event of an accident or other emergency, who may direct and consent to medical treatment and sign any releases required? \_\_\_\_\_  
\_\_\_\_\_
16. Who makes decisions regarding the student's medical needs and treatment? \_\_\_\_\_  
\_\_\_\_\_
17. Who makes decisions regarding the student's education? \_\_\_\_\_  
\_\_\_\_\_
18. Briefly state the reason(s) why the student was enrolled in the District: \_\_\_\_\_  
\_\_\_\_\_
19. Do you have legal custody of the student? \_\_\_\_\_ Yes \_\_\_\_\_ No
- If no, state the name and address of the person who does have legal custody:  
\_\_\_\_\_
  - State the reason(s) why you do not have legal custody of the student:  
\_\_\_\_\_
20. Who claims the student as a dependent on their Federal Income Tax Return? \_\_\_\_\_
21. Attach copies of any agreements, judgments, decrees or other documents awarding or giving custody of the named student to any person. If, to your knowledge, there are no such documents please indicate in the space below:  
  
[ ] No such documents
22. Does anyone receive Illinois public aid payments for the student? If so, who? \_\_\_\_\_  
\_\_\_\_\_
23. Provide any additional information which may help to establish the student's residency or which is otherwise relevant to the question of the student's residency: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Part II: To be completed by the District resident:**

I, \_\_\_\_\_, hereby state that I live at  
*District resident*

\_\_\_\_\_, \_\_\_\_\_,  
*street address city*

\_\_\_\_\_, \_\_\_\_\_ and that \_\_\_\_\_  
*state phone number parent/guardian living with District resident*

has lived with me since \_\_\_\_\_ for the following reason(s):  
*date*

(State any and all reasons): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*name of District resident (printed)*

\_\_\_\_\_  
*name of District resident (signature)*

\_\_\_\_\_  
*date*





NOTE: It is contrary to the policy of the Board of Education to admit students who do not legally reside with their parents or legal guardians within the District boundaries. The information you provide will be used by school officials to help establish the eligibility of each applicant for admission. Falsification of information on this form or otherwise submitted to the District may result in your child being excluded from school, and may expose you to monetary liability under Illinois law for payment of tuition for such time as your child was illegally enrolled in the District. Further, any persons who knowingly enrolls or attempts to enroll a non-resident student in the District or presents to the District any false information regarding the residency of a student commits a Class C misdemeanor.

This form serves as substitute for 7:60 AP2 Category A only when appropriate. Three documents from Category B are still required.

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