STATE OF ILLINOIS)
)
COUNTY OF)

AFFIDAVIT OF RESIDENCE

SECTION 1—To be completed by parent, foster parent, or guardian (I)(We), _____ having first been sworn upon (my) (our) oath depose and say as follows: That (I am) (we are) the parent(s), foster parent(s), guardian(s), or _____ of _____, age _____, and that (his) (her) residence is _____(street address), City (Village) of ______, ______, County, Illinois, within the territorial boundaries of ______ School District, County, Illinois. That the said child's residence within the said school district has not been established solely for the purpose of attending the schools thereof. That the following facts are sworn to in order to permit the said school district to enroll the said child in the schools of said district as a resident: Yes No The said child eats (his) (her) meals regularly at the said residence..... The said child sleeps regularly at said residence..... The said child spends (his) (her) weekends regularly at said residence..... The said child spends (his) (her) summers regularly at said residence.....

FURTHER YOUR AFFIANT SAYETH NOT.

	Signature(s)
	Address
SECTION 2—To be completed by	the property owner/lessee:
I,	attest that the person(s) listed above is (are)
Name of Resident	
living at my residence at	
	Address
Community Consolidated School Dis	strict 15 boundaries.
I understand that I may be require residency at the above address.	ed by CCSD 15 to show two verifications of my
•	have given is true and correct and I understand that I may or perjury if I have knowingly provided any false information
15 is obligated to assure that all studbasis are residents of the district and	d of Education of Community Consolidated School District dents attending public school in the district on a tuition-free d that the parents of any non-resident students found to en in the district's schools will be assessed a per-capita in 10-20.12(a) of the School Code.
Signature of Resident	Date
The foregoing was sworn to before i	me and subscribed in my presence thisday
of, 20_	·
Notary Public	

Revised 9/18/03