State of Illin	ois		
County of			

2016-17 Affidavit of Residence

The fields in this form will accept a cursor and can be filled out prior to printing.

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(I) (We),			having first been	sworn up	on (my	y) (our) oath depose	and say as f	follows:	
That (I am) (we are) the parent(s), foster parent(s), or court ordered legal	al guardia	ın(s) of					, age		,
and that (his) (her) residence is		(street ac	ddress), City (Villag	ge) of					,
County, Illinois, withir	n the terri	torial bo	undaries of						
School District,							County(ie	s), Illino	is
That the said child's residence within the said school district has not be	een estab	lished so	lely for the purpos	se of atten	nding t	he schools thereof.			
That the following facts are sworn to in order to permit the said school	l district to	o enroll t	he said child in the	e schools o	of said	district as a residen	t.		
Length of time both the child <u>and</u> parents, custodial parent or legal guardian have resided at the above address:									
The said child eats (his) (her) meals regularly at said residence		es (No						
The said child sleeps regularly at said residence		es (No						
The said child spends (his) (her) weekends regularly at said residence	○ Ye	es (No						
The said child spends (his) (her) summers regularly at said residence	○ Ye	es (No						
Child provides % of (his) (her) support.									
FURTHER YOUR AFFIANT SAYETH NOT.									
	Signature(s)								
-				Ado	dress				_
Subscribed and sworn to before me this day of		, [
Notary Public									