

State of Illinois )

County of \_\_\_\_\_ )

**2024-2025 Affidavit of Residence**

(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), or court ordered legal guardian(s) of \_\_\_\_\_, age \_\_\_\_\_, and that (his) (her) residence is \_\_\_\_\_ (street address), City (Village) of \_\_\_\_\_, \_\_\_\_\_ County, Illinois, within the territorial boundaries of \_\_\_\_\_ School District, \_\_\_\_\_ County(ies), 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.

**Length of time both the child and parents, custodial parent or legal guardian have resided at the above address: \_\_\_\_\_**

The said child eats (his) (her) meals regularly at said residence Yes \_\_\_ No \_\_\_

The said child sleeps regularly at said residence Yes \_\_\_ No \_\_\_

The said child spends (his) (her) weekends regularly at said residence Yes \_\_\_ No \_\_\_

The said child spends (his) (her) summers regularly at said residence Yes \_\_\_ No \_\_\_

Child provides \_\_\_\_\_% of (his) (her) support.

FURTHER YOUR AFFIANT SAYETH NOT.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

Subscribed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public