

## Proviso Township High Schools District 209 Verification of Residency

Student Name	ID#	Date of birth
Relationship to student		
		he birth certificate is not available at the time along with a signed affidavit, until a certified
Check one below:		
I am the natural or adoptive parent	listed on the birth certificate. (Please provid	le custody agreement, if applicable)
I was granted court-ordered guardi	anship. (Please provide copy of court docum	nent)
I receive public aid on behalf of the	e child. (Please provide copy of the docume	ntation showing receipt of aid)
I have assumed and exercise respon	nsibility for the child and provide him/her w	rith a fixed, nighttime abode.
Please check each of the following boxe	es to be true and accurate:	
The child is living with me because	e	
The child eats and sleeps at my res	idence on a regular basis.	
The child is not living with me for	the sole purpose of having access to the edu	cational programs of the school district.
I am at least 18 years of age.		
Affirmation and Warning		
Please read the following, initial each	n statement, and sign below:	
	on presented in this verification form, in con of the student, is true, complete, and accura	nection with any investigation of my residency or te.
	enabling that child to attend any school in the	to a school district regarding the residency of at district without the payment of nonresident
basis when I know that chi	, , , , ,	n the school of a school district on a tuition-free less the nonresident child has a lawful right to uition, free, and all other applicable fines.
/	Adult (Signature)	Adult (Print Name)
Office Use Only		
Date	Enrollment Personnel (Signature)	Enrollment Personnel (Print Name)
	Form Complete Form I	ncomplete



## **Proviso Township High Schools District 209 Residency Attestation Form (Must be notarized)**

ID#
12

\*To be used when a lease is not available

This form is only required for parents/guardians who do NOT currently own their own home or have a lease.

In order to comply with the Proviso Township High S following information for	Schools District 209's proof of	residency requirement	t, I verify the
Names of S	Student(s) and Guardian(s)		
I, First and Last Name	, am the owner/leaseholder	<b>/landlord</b> of the resid	ence
located at			
located atNumber, Street, Apt#	City	State	Zip
I attest that the student(s) named above and his/her gu	uardian(s) have been living at t	he above	
address since/ and to the best of m	ny knowledge will continue to r	reside at this address	
until /			
		/ /	
Owner/Leaseholder/Landlord Sign	nature	Date	
Address		Phone	_
Property owners must attach a copy of their curre current lease. Landlords may be ask			
•	MUST BE NOTARIZI		т.
Certificate of Acknowledgemen			
State of	County of		
On	before me,		
Date	before me,	(notary)	
personally appeared,			
1	(signers)		
personally known to me OR			
proved to me on the basis of satisfactory evidence to be the person me that he/she/they executed the same in his/her/their authorized or the entity upon behalf of which the person(s) acted, executed to	capacity(ies), and that by his/her/thei		
WITNESS my hand and official seal	<del></del>		
	(notar	y signature)	