

AFFIDAVIT OF PARENT NOT LIVING WITH THE STUDENT

**To be Completed by the Natural or Adoptive Parent When the Student is Not Residing with that Parent**

NAME OF STUDENT \_\_\_\_\_ Age \_\_\_\_\_

1. Your name \_\_\_\_\_ Phone \_\_\_\_\_

2. Your present address \_\_\_\_\_  
Street and House or Apartment Number

\_\_\_\_\_  
City

3. Do you currently own or rent your place of residence? Own \_\_\_ Rent \_\_\_ Other \_\_\_

4. If you do not own or rent your place of residence, please explain. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. State the reason(s) why your child is NOT living with you: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. How long has your child NOT lived with you? \_\_\_\_\_

7. With whom and at what address does the student live? \_\_\_\_\_

\_\_\_\_\_

8. How long do you intend for your child to live at that address? \_\_\_\_\_

\_\_\_\_\_

9. How many nights per week does your child live and sleep at that address? \_\_\_\_\_

10. List any other address where your child lives or sleeps on a regular basis. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

11. Who is financially responsible for any damages, lost books, or fines of the student?

\_\_\_\_\_

12. Who is responsible for the discipline and control of the student? \_\_\_\_\_

\_\_\_\_\_

13. If an accident or emergency were to occur, who will direct and consent to medical treatment and sign any required releases? \_\_\_\_\_

14. How many other children do you have in your family? \_\_\_\_\_

a) List the names and ages of your other children: \_\_\_\_\_

\_\_\_\_\_

b) Where and with whom do each of the other children live? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Briefly state who enrolled the named student in a CCSD 89 school and the reasons why the student was enrolled in this District.

\_\_\_\_\_

\_\_\_\_\_

16. Do you have legal custody of the student? Yes \_\_\_ No \_\_\_

If NOT, please state the name and address of the person(s) having legal custody:

\_\_\_\_\_

\_\_\_\_\_

17. If you have legal custody, have you given legal guardianship over to another person?

Yes \_\_\_ No \_\_\_

If YES, state the name and address of the person who you have given the authority of legal guardianship to and provide their address: \_\_\_\_\_

\_\_\_\_\_

18. Attach or provide copies of any agreements, judgments, decrees or other documents awarding or giving custody or guardianship of the named student to you or someone other than the natural or adoptive parent.

No such documents

19. Is the student eligible for special education or other special services? Yes \_\_\_ No \_\_\_

If yes, please provide a copy of the student's most recent Individualized Education Program (IEP) or Section 504 Plan and provide us with the name and address of the student's most recent prior school district of attendance

\_\_\_\_\_

20. 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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AFFIDAVIT

This affidavit must be notarized by a Notary Public unless signed in the presence of the school registrar or a school administrator.

STATE OF ILLINOIS            )  
  )  
COUNTY OF                        )        ss.

The undersigned, being duly sworn, states that the answers to the questions in Form 500:50-F3 are true and correct.

\_\_\_\_\_  
Natural or Adoptive Parent Signature

SUBSCRIBED AND SWORN to  
before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Signature

**OR**

SIGNATURE WITNESSED by me  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Registrar or Administrator’s Signature

**NOTE: It is contrary to the policy of CCSD 89 to admit students who do not legally reside with a resident of CCSD 89. The information you provide will be used by school officials to help establish the eligibility of each applicant for admission. Falsification of any information on this form or otherwise submitted during the enrollment process may result in the child named above to be excluded from school, and may expose you to monetary liability under Illinois law for payment of tuition for such time as the child was illegally enrolled in the District. Further, any person who knowingly enrolls or attempts to enroll a non-resident student in the District or presents false information regarding residency has committed a Class C misdemeanor and shall be referred for criminal prosecution.**

1/11, 5/14, 3/17, 7/2020  
CCSD 89, Glen Ellyn, Illinois