

**Proof Of Residency In
Benjamin School District No. 25**

(Please print)

I, _____ affirm, as of the date of my signing this Proof Of Residency, I live at (address) _____ in (city) _____ and by this residency, am legally entitled to have my child _____ attend (circle) **Benjamin ~ Evergreen** School. This child will be residing at this address during the _____ academic school year.

I understand that, as the custodial parent or legal guardian, if I move outside of the legal boundaries of Benjamin School District No. 25 during the school year, it is my responsibility to notify the principal of (circle) **Benjamin ~ Evergreen** School that I am no longer a legal resident of Benjamin School District No. 25.

In signing this document, I acknowledge having read and understood the following provision of *The School Code of Illinois*.

“If a pupil is determined to be a nonresident of the district for whom tuition is required to be charged pursuant to this section, the School Board shall refuse to permit the pupil to continue attending the schools of the district unless the required tuition is paid for the pupil. A person who knowingly or willfully presents to any school district any false information regarding the residency of a pupil for the purpose of enabling that pupil to attend any school in that district without the payment of a non-resident tuition charge shall be guilty of a Class C misdemeanor.” (105 ILCS 5/10-20.12b)

As confirmation of my residence above, a copy of the documents as specified on the attached list have been enclosed by mail or presented to the appropriate official at the (circle) **Benjamin ~ Evergreen** School.

I understand that if the above information is determined to be false or misleading, the child/children named above will not be legally entitled to attendance at (circle) **Benjamin ~ Evergreen** School.

Signature of Benjamin School District No. 25 resident
who is parent, guardian, or custodian of student.

Date _____

PROOF OF RESIDENCY

Name of Student _____ Birth Date _____

Evidence of proof of residency presented:

Category I - (one document)

- | | |
|--|---|
| <input type="checkbox"/> Real estate tax bill | <input type="checkbox"/> Mortgage papers |
| <input type="checkbox"/> Signed lease | <input type="checkbox"/> An agreement of sale |
| <input type="checkbox"/> Affidavit from local resident attesting
registrant is living with the owner at no cost | |

Category II - (three documents showing proper address)

- | | |
|---|---|
| <input type="checkbox"/> Driver's license | <input type="checkbox"/> Library card showing current address |
| <input type="checkbox"/> Voter registration | <input type="checkbox"/> Credit card bill |
| <input type="checkbox"/> Auto registration | <input type="checkbox"/> Public Aid card |
| <input type="checkbox"/> Home/apartment insurance papers | |
| <input type="checkbox"/> Gas or electric bill (telephone bill not acceptable) | |
| <input type="checkbox"/> Other: | |

I cannot provide the required evidence for the following reason(s): _____

I will provide evidence of my residency by: (date) _____

This Proof Of Residency form is to attest that the above child is not enrolling in the District solely for school purposes and is living on a permanent basis with the person having complete custody and control. Registration of a student who is not a resident is a fraudulent act. Any student found to have been fraudulently registered will be dropped from the attendance rolls immediately. Parents or guardians making a fraudulent registration will be subject to the payment of retroactive tuition charged for nonresident students, not to exceed 110% of the per capita cost.

I certify that I understand the residency requirements and that I know the penalty for fraudulent registration.

Signature of parent/guardian _____
Date

Relationship: _____ Phone: () _____

Address of Parent/Guardian _____
