## **NEW LENOX SCHOOL DISTRICT 122**

## **AFFIDAVIT OF RESIDENCY:**

**2021-2022 School Year** 

I/We parent / guardian	, seek to enroll					
parent / guardian		student(s)				
and hereby state that I/we live at						
r	state zip	phone number	<del></del>			
Length of time living at the above in-dis	etrict address:					
Length of time living at the above in this	Strict address					
Please state the reason(s) parent/guard	dian seeks enrollment at	the above in district addre	ess:			
Anticipated length of time you will be at	t the above in district ad	dress:				
Parent/ Guardian relationship to the dist	trict resident:					
I cannot provide a lease, purchase prop water, or cable bill because:			ectric, gas,			
IMPORTANT: The Parent / Guardian is required to provide thre the right to evaluate the evidence presented, an enrollment. Completion of affidavit is required or	nd merely presenting the item					
<b>WARNING:</b> Please read the following statements, <u>initi</u>	al each, and sign below: (	Must be completed in the presence o	of Notary Public)			
I understand that knowingly and versidency of a child for the purpose of enanonresident tuition is a crime; a Class C mile the full extent of the law, of any person Additionally, a civil lawsuit may be initiated	abling that child to attend isdemeanor 105 ILCS5/ 10 who the District believes by the District.	any school of the district wit -20.12b. The District will see has committed any residen	thout payment ek prosecution, cy-related crim			
I understand that any student foun from the District and the parent/guardian v had been enrolled with New Lenox School D	will be assessed the curre	. •	•			
I affirm that I live within the boupresented in this Affidavit and in connectstudent(s) is true, complete and accurate and	tion with any investigation	on of my residency or the	residency of t			
(name of person seeking to enroll student(s	(name of person see (SIGNATUR	king to enroll student(s))	(date)			
NOTARY SEAL:						
Subscribed and sworp to						
Subscribed and sworn to before me thisday Of, 20						

## **NEW LENOX SCHOOL DISTRICT 122**

## **AFFIDAVIT OF RESIDENCY:**

**2021-2022 School Year** 

PART 2:	To be completed by the District Resident						
I/We	, hereby state that I/We live at  District resident street address						
	District resident			street address			
	city	_,, _ state	zip	phone	number		
Length of ti	me Parent/ Guardian has be	en living at the	e above in-district	address:			
Please state	e the reason(s) parent/guard	ian seeks enro	llment at the abo	ove in district add	ress:		
District resid	dent relationship to the Pare	nt/ Guardian: ˌ					
•	not provide a lease, purchase or cable bill because:		• •	, , ,	nd an electric,		
Number of I	bedrooms: Total nu	mber of perso	ns living in dwelli	ng:			
II) of residence School District not guarantee	ent is required to provide one (1) p cy. The Parent / Guardian is also t reserves the right to evaluate the a student's enrollment. Completion	required to provide evidence preser	de three (3) secondanted, and merely pre	ry forms (Category I senting the items lis	I) of residency. The		
WARNING Please read	ı: the following statements, <u>initia</u>	al each, and sig	n below: (Must be co	mpleted in the presence	e of Notary Public)		
residency of nonresident the full exte Additionally, I und from the Dishad been en	derstand that knowingly and value a child for the purpose of enal tuition is a crime; a Class C mis nt of the law, of any person a civil lawsuit may be initiated lerstand that any student found trict and the parent/guardian varolled with New Lenox School D	bling that child sdemeanor 105 who the District to have been will be assessed istrict 122.	to attend any scho ILCS5/ 10-20.12b. t believes has cor fraudulently regis the current per c	ool of the district will something the District will something the District will something the District will be immediated apita tuition for the District will be immediated.	without payment of eek prosecution, to ency-related crime ediately withdrawr e time the student		
presented in	rm that I live within the bounthis Affidavit and in connect true, complete and accurate ar	ion with any i	nvestigation of my	y residency or the	e residency of the		
(name of dist	trict resident – <b>PRINTED</b> )	(name of c	listrict resident – <b>S</b>	IGNATURE)	(date)		
before me	SEAL: and sworn to thisday , 20						
<u> </u>	,			Notary Signa	ature		