Manhattan School District 114

From: Mr. Russell Ragon Superintendent					
Subject: Residency Requirements					
Student's Name:					
Manhattan School District #114 requires that all studentide residents of the district. To be a bona fide resident approved guardian with legally acceptable custody and district. At the time a student is registered, parents or a documents showing proof of residency.	a student must be living with a parent or control documents and is a resident of the				
Registration of a student who is not a resident is a fraud fraudulently registered, will be dropped from the district making a fraudulent registration will be charged the perattended.	ct rolls immediately. Parents or guardians				
I certify that I understand the residency requirements a registration.	nd that I know the penalty for fraudulent				
Source of verification for proof of residency: One item Category II.	from Category I and 2 items from				
Category I (1 document required) () Most recent property tax bill () Mortgage papers or current Statement () Signed and dated lease and proof of payment () Letter from manager & proof of payment	Category II (2 documents required) () IL Driver's License () Vehicle registration () Voter's registration card () Homeowners/Renters Ins. Policy () Most recent utility bill () Medicaid medical card				
If you are living with a District resident and cannot promust complete an Affidavit of Residency and have it reprovide the supporting residency documents.	ove residency, you and the district resident otarized. The district resident will then				
(Address)					
(Signature of Parent or Guardian)	(Date)				

Revised 10/1/14 JB

Manha an School Discric 114

AFFIDAVIT OF RESIDENCY:

PART 1: To be completed by the person seeking to enroll the student/s |/We______, seek to enroll ______

I/VVe	, seek to enror	d		
(Parent/guardian)	70		(Student nam	ne)
and hereby state that I/we live a	at			
·		(Street address	<i>š</i>)	
(City)	(State)	(zip)		(Phone number)
since moving from		,		
-	(City)	(State)	(zip)	(Phone number)
I live with	for the	e following re	asons: (state ar	ıy and all reasons)
I cannot provide a lease, purcha	ase property agreement or p	roperty tax rec	ceint: and a gas	water, phone, or
Electric bill because:	15e property agreement of F.	operty water	,cipy and = o= ,	, water, p ,
Please review to determine if your shelter/transitional living facilities reason motel, campground or siguardian train or bus station, pafoster care placement.	ies sharing the housing of oth imilar situation due to a lack of	ervices. Are you thers due to loss of alternative hou	s of housing, ecor using [] not living	nomic hardship or similar ng with a parent or legal
(Name of person seeking to enroll stu		f person seeking to e		(Date)
NOTARY SEAL:				
Subscribed and Sworn to				
Before Me This Day				
Of, 20		-	NOTARY S	SIGNATURE
			1101/111	.010110.12

IMPORTANT:

The Parent/Guardian is required to provide two (2) secondary forms (Category II) of residency. The School District reserves the right to evaluate the evidence presented, and merely presenting the items listed in the form does not guarantee a student's enrollment.

WARNING:

If a student is determined to be a non-resident of the District for whom tuition must be charged, the persons enrolling the student are liable for non-resident tuition from the date the student began attending a District school as a non-resident.

A person who knowingly enrolls or attempts to enroll in the School District on a tuition-free basis, a student known by that person to be a non-resident of the district is guilty of a Class C misdemeanor, except in very limited situations as defined in State law (105 ILCS 5/10-20.12b(e).

A person who knowingly or willfully presents to the School District any false information regarding the residency of a student for the purpose of enabling that student to attend any school in that District without the payment of a non-resident tuition is guilty of a Class C misdemeanor (105 ILCS 5/10-20.12b(f).

Manha□an School Dis_ric 114

AFFIDAVIT OF RESIDENCY:

PART 2: To be completed by the District Resident

We hereby state that I/We live at				
(District resident)			(Street	address)
(City)	(State)	(Zip)	(Phone n	umber)
	has l	lived with me since_		
(Person living with District resident)	(Person living with District resident) (Date)			
for the following reasons (state any	y and ALL rea	asons):		71
He/She cannot provide a lease, puphone, or electric bill because:				
Total number of persons living in Number of rooms: Number of bedrooms:	unit:			**
(Name of District Resident)PRINTED NAME		(Name of District F WRITTEN SIGNATI		(Date)
NOTARY SEAL: Subscribed and Sworn to Before Me This Day Of, 20			notary s	IGNATURE

IMPORTANT:

District Resident is required to provide one (1) primary from (Category I) of residency and two (2) secondary forms (Category II) of residency. The Parent/guardian is also required to provide two (2) secondary forms (Category II) of residency. The School District reserves the right to evaluate the evidence presented; merely presenting the items listed in this form does not guarantee a student's enrollment.

WARNING:

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Manhattan School District 114

25632 S. Gougar Road Manhattan, IL 60442 Phone 815-531-3350 Fax 815-478-6035

Wilson Creek Elementary 25440 S. Gougar Road Manhattan, IL 60442 815-478-4527 Grades K-2

Request date _

Anna McDonald School 200 Second Street Manhattan, IL 60442 815-478-3310 Grades 3-5 Manhattan Jr. high 15606 W. Smith Road Manhattan, IL 60442 815-478-6090 Grades 6-8

School Called _____

Grades K-2		Grades 3-5	Grades 6-8
CON	SENT FOR RE	LEASE OF STUDE	
			Grade
Birthdate:			
	The s	tudent(s) will reside at:	
	91		
	-		
	Phone#		
		School Exiting:	
			c
	a		
	-		;
Phone Number_		Fax Number	
Please send Records t	:0:		
	*********	ttan School District 11	4
		632 S. Gougar Road anhattan, IL 60442	
	141	umattan, 12 00 1 12	
☑ I hereby author health, cumulative, spestudent(s).	rize Manhattan Sc ecial education, a	chool District 114 to ob nd physiological evalua	tain all school records including tions for the above named
Signature of Parent/Gu	uardian	Date	-
FEDERAL LAW 99.31 educational agency. R (10) school days.	No parent signa ecords will be se	ture is required for edu nt as indicated above i	cational records sent to another we do not hear from you within
For office use only:			

Second Request _____