<u>Students</u>

Exhibit - Evidence of Non-Parent's Custody, Control, and Responsibility of a Student

This form establishes a child's residency in the School District when the child is not living with a natural or adoptive parent. It must be completed by the individual who has assumed custody. Read **Important Warning** and submit this form with your signature to the Building Principal.

Student's name		District attendance building	
Name of individual print)	completing this form (Please	Relationship to child	
Please check all app	olicable boxes:		
		ess, as stated below, and is not living with me solely for the	ıe
	ding the District's school.	,	
☐ I have assumed	and exercise full legal responsi	bility for and control of the child regarding daily education	al
and medical dec	isions, including responsibility f	for:	
medical deci	sions and costs	food and clothing	
	d restitution for vandalism or otl		
	child regularly: (Please explain		
Sleeps			
☐ Spends week	tends and summers		
A person who know known by that perso situations as defined A person who know residency to enable	n to be a nonresident of the Dist in State law (105 ILCS 5/10-20 yingly or willfully presents to the	ne School District any false information regarding a student of in the District without the payment of a nonresident tuition	ed 's
Date	Signature of individual com	pleting this form	
Telephone	Address		
Optional: To be con	npleted by the natural or adopti	ve parent(s), if one is available.	
Please check all app	olicable boxes:		
	or adoptive parent of the child.		
☐ I have willingly	transferred full custody and con	trol of, as well as responsibility for this child to:	
The transfer of c	custody is not solely for the purp	ose of attending the District's schools.	
Date	Signature of individual com	pleting this form	
Telephone	Address		

Rev. 10/16 7:60-AP2, E3