Please Note: This affidavit is only valid for the 2023-2024 school year.

Office Use Only:

Student Name: _____

ID#: _____

STATE OF ILLINOIS)

) SS

COUNTY OF LAKE }

RESIDENCY AFFIDAVIT

I, _____ Landlord/Homeowner/Lessor _____, providing proof of residency, being duly sworn on oath, depose and say:

The undersigned {parent/guardian(s)} and their minor child(ren)

_____

_____

_____ at the date hereof permanently reside at this address____ _____

_____

within the legal boundaries of Community Unit School District No. 60, Lake County, Illinois (Waukegan Public Schools).

If at any time the aforesaid parent/guardian(s) and/or their aforesaid minor child(ren) shall cease to permanently reside at the aforesaid address, they will immediately notify the Student's school(s), of such fact at the offices of said School District. No. 60.

DATE: _____

_____
SIGNATURE OF LANDLORD/HOME OWNER/LESSOR

Telephone No. (Day):

_____

Home Address:

_____

VERIFICATION MUST BE ATTACHED: PROOF THAT THE LANDLORD OWNS THE RESIDENCE (ONLY A RECENT GAS AND/OR ELECTRIC BILL, MORTGAGE CONTRACT, TENANT LEASING AGREEMENT, ETC.)

SUBSCRIBED & SWORN to before me
This _____ day of _____, 20__.

_____

NOTARY PUBLIC

Revised January 2008