

RESIDENCY REQUIREMENTS

Student's Name: _____

Midlothian Elementary School District #143 requires that all students attending #143 schools be bona fide residents of the district. ***To be a bona fide resident, a student must be living with a parent or a court-approved guardian who is a resident of the district.*** At the time a student is registered, parents or guardians will be required to provide proof of residency. (See news article on residency attached.)

Legislation has been signed that makes it a misdemeanor, punishable by a \$500 fine or up to 30 days in jail, to knowingly enroll a child in the wrong school district. Registration of a student who is not a resident is a *fraudulent act*. Any student found to have been fraudulently registered will be disenrolled from the district *immediately*. Parents or guardians making a fraudulent registration will be charged with a misdemeanor, punishable by a \$500 fine or up to 30 days in jail. The Board of Education will take legal action against those registrants who fraudulently enroll in District #143. A prorated tuition fee will also be charged for the time the student was fraudulently enrolled.

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

Anything produced for residency verification must be **within the past month**.

Source of verification: Produce at least **three** items indicating current address from the following list:

Utility Bill (i.e., gas, electric, hardline telephone, or water; only 1 allowed)	A mortgage or copy of payment stub issued by lending institution indicating address
Automobile insurance policy	Closing papers on a home
Vehicle Registration or a copy of vehicle registration form with current license plate number	A letter from insurance company indicating address to which any current policy applies
Current payroll check stub showing address	Bank statements
Driver's License or State ID	Medicaid Card showing child's name and number assigned and name of the Medicaid Caseworker
Homeowners/renters insurance	A letter from Illinois Department of Public Aid and your Caseworker's name verifying current address
Real Estate Tax Bills	

Address

Telephone Number

Signature of Parent or Guardian

Date

REG: Board of Education Policy #7.60

Office Use Only: Please Initial

Approved _____

Checked _____