MAINE TOWNSHIP HIGH SCHOOL SOUTH

CUSTODIAL CARE FORM (PART 2)

TO BE COMPLETED BY FAMILY PROVIDING CUSTODIAL RESIDENCE

This is to verify that the information property and that:	rovided on the Custodial C	Care Form (Part 1	l) is true and	
Student's Name	Parent(s)/Legal G		Guardianship(s) Name	
reside in my family residence on a full arrangement is due to unique family or student eligible to attend the schools or that falsifying information regarding reimmediate termination of education se \$21,700.93 (including \$250 school resfurnish the necessary proof of my resident to the following facts are sworn to in order.	r personal reasons—not me f Maine Township High Se esidency in District 207 for rvices and/or the assessme ource fee) per year for the dence within District 207 a	erely to qualify to chool District 20 rethis child will rent of tuition character 2022-23 school as per Board of E	his child as a of. I understand result in the rges at year. I will ducation policy	
 a. The said child and parentse eat our meals regularly at the b. The said child and parentse sleep regularly at said residence. The said child and parent(seepend weekends regularly the said child and parentse spend weekends regularly the said child and parentse spend summers regularly and summers regularly and summers regularly and summers regularly and seepend seepend	(s)/legal guardian(s) the said residence. (s)/legal guardian(s) dence. s)/legal guardians at said residence. (s)/legal guardian(s)	Yes	No	
	Signature:			
	Printed Name:			
	Address:			
Subscribe and sworn before me this Day of: A.D. 20 Notary Public	Telephone:			
My commission expiration date:				