



South Holland School District 150

District Office

848 East 170th Street

South Holland, Illinois 60473

Phone: 708.339.4240 – Fax: 708.339.4244

www.sd150.org

**SCHOOL BOARD
MEMBERS**

_____ Date

Sherie Nunnally
President

Pamela Tucker
Vice-President

Stacy Magee
Secretary

Aronesus Cunningham
Member

Felicia Houston
Member

Della Mayes
Member

Lawrence Wilson
Member

ADMINISTRATION

Dr. Denise Julius
Superintendent

Tiffany Webb
Assistant Superintendent
for Curriculum

Myra Lolkema
Director of Technology

Greenwood Elementary
168th St. & Greenwood Ave.
South Holland, Illinois
Phone: 708.339.4433
Fax: 708.339.3942

Carla Cunningham
Principal

Richard Brown
Assistant Principal

**McKinley Elementary &
McKinley Junior High**
16949 Cottage Grove
South Holland, Illinois
Phone: 708.339.8500
Fax: 708.331.5805

Dr. Jerome Ferrell Jr.
Principal

Joseph Ingram
Assistant Principal

Ayanna Perkins
Assistant Principal

RESIDENCY VERIFICATION

(Living With)

Dear Parent/Guardian:

In completing the registration form for your child, you have indicated you live in a residence in the district where you are not the owners of record. You and the owner of record are now required to have this form completed. **IT WILL BE NECESSARY TO RENEW THIS FORM EACH YEAR.**

I, _____, owner of the
Owner's Name Telephone Number

property at: _____, South Holland, IL hereby swear or
Address of property

affirm that _____ and _____
Parent/Guardian Name Names and Ages of Children

_____ are living with me within the boundaries of
Names and Ages of Children

School District #150. I further swear and confirm that the student(s) and parent(s) are living with me
because _____

This living arrangement began on _____ and will continue until _____, 20____.
Month, Day, Year

The enrolling parent and the property owner each must be in attendance to provide documentation listed on the District's Required Documentation Reference Sheet. Also, this Residency Verification with signature notarized must be returned before enrollment.

I, will notify the School District immediately if these living arrangements change. I, agree to pay any and all legal and collection expenses the District may incur to collect tuition for a nonresident student(s).

(Over Please)

Verification of information will need to be completed yearly.

Denise Julius, Ed.D.
Superintendent

Parent/Guardian Signature

Owner's Signature

Subscribed and sworn to before me this _____ day of _____, 20__.

_____ Notary Public

WARNING: Any false statement made on this sworn Residency Verification form may be subject to criminal prosecution. Knowingly providing fake documents to attend a school is a crime worthy of 30 days in jail or a maximum \$1,500 fine.