

LYONS TOWNSHIP HIGH SCHOOL DISTRICT 204

STUDENT ENROLLMENT FORM

OFFICE USE ONLY

ID# _____ YR OF GRAD _____ GRADE _____
 COUNSELOR _____ BUS # _____
 RESIDENCY APPROVAL _____ DATE OF APPROVAL _____
 ENROLLMENT APPROVAL _____ DATE OF APPROVAL _____
 ENTERED BY _____

INSTRUCTIONS AND AFFIRMATION

The Student Enrollment Form is to be completed by the person claiming custody of the student and with whom the student resides within Lyons Township High School District 204. Illinois law has made it a crime, punishable by imprisonment and fine, to knowingly or willfully present any false information regarding the residency of a student for purposes of enabling that student to attend on a tuition-free basis or to knowingly enroll or attempt to enroll a student on a tuition-free basis when the student is known to be a non-resident of the district. The District will seek prosecution to the full extent of the law of any person who the District believes has committed any residency-related crime. Additionally, a civil lawsuit may be initiated by the District. Any costs associated with investigation into fraudulent residency will be sought after from those attempting to enroll illegally, including annual tuition. I affirm that I am a resident of this District and that the information presented in this form or in connection with any investigation of my residency or the residency of the student is true, complete, and accurate. My signature below also gives permission to District 204 to contact individuals having knowledge of current residency, including but not limited to landlords, lease holders, relatives where indicated, previous schools, etc.



PRINT NAME OF PARENT/GUARDIAN _____
 SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

GENERAL INFORMATION

STUDENT'S LEGAL NAME (AS SHOWN ON BIRTH CERTIFICATE)

LAST NAME	FIRST NAME	MI
DATE OF BIRTH / /	MALE/FEMALE	ENROLLING GRADE 9 10 11 12
LAST SCHOOL ATTENDED	CITY, STATE	# OF CREDITS EARNED
MOTHER'S MAIDEN NAME	STUDENT'S BIRTH COUNTRY	# OF YRS EDUCATED IN THE US

STUDENT'S PREVIOUS ADDRESS _____ CITY, STATE _____

PARENT/GUARDIAN 1: (THE PERSON WITH WHOM THE STUDENT LIVES)

LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT
ADDRESS		HOME TELEPHONE () _____
CITY	ZIP	CELL () _____
EMAIL ADDRESS		WORK () _____

PARENT/GUARDIAN 2: STUDENT LIVES WITH: YES NO If the answer is no, initial here if you want the parent/guardian to receive District mailings.

LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT
ADDRESS		HOME TELEPHONE () _____
CITY	ZIP	CELL () _____
EMAIL ADDRESS		WORK () _____

EMERGENCY CONTACT 1:

LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT
ADDRESS		HOME TELEPHONE () _____
CITY	ZIP	CELL () _____
EMAIL ADDRESS		WORK () _____

EMERGENCY CONTACT 2:

LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT
ADDRESS		HOME TELEPHONE () _____
CITY	ZIP	CELL () _____
EMAIL ADDRESS		WORK () _____

OTHER SCHOOL-AGED CHILDREN IN THE HOUSEHOLD:					
LAST NAME	FIRST NAME	RELATIONSHIP TO STUDENT			
ATTENDING SCHOOL AT	CITY, STATE	M/F	AGE	GRADE	
STUDENT LIVES WITH: <input type="checkbox"/> Both parents <input type="checkbox"/> Mother only <input type="checkbox"/> Father only <input type="checkbox"/> Guardian <input type="checkbox"/> Mother/Stepfather <input type="checkbox"/> Father/Stepmother <input type="checkbox"/> Other: please specify all members of the household					

HOME LANGUAGE SURVEY (ENGLISH)

- Does anyone in your home speak a language* other than English? Yes No If yes, what language? _____
 - Does the student speak a language* in the home other than English? Yes No If yes, what language? _____
- *Please note this does not include languages learned in school.
- If the student was not born in the United States, enter the date the student first entered the United States? Date: ____/____/____
 - Has the student received ELL/ESL or bilingual services before? Yes No If yes, for how many years? _____

HOME LANGUAGE SURVEY (EN ESPAÑOL)

- ¿Hay personas en su hogar que hablen otro idioma*? Sí No ¿Cuál idioma? _____
- ¿Habla otro idioma* en la casa el estudiante que no sea inglés? Sí No ¿Cuál idioma? _____
- *Si el alumno no nació en los Estados Unidos.
- ¿Cuál fue la fecha que entró al país? _____
- ¿Ha recibido el estudiante servicios bilingües o de ESL/ELL? Sí No ¿Cuántos años? _____

Is this student Hispanic/Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin) Choose only one. No, not Hispanic/Latino Yes, Hispanic/Latino

The question above is about ethnicity, not race. No matter which answer you selected, continue and respond to the ethnic codes question in the next section by marking one or more boxes to indicate what you consider this student's race to be.

¿Es este alumno hispánico/latino? (que sea, una persona de origen cubano, mexicano, puertorriqueño, sud-o centroamericano) Escoja solamente uno. No, no es hispánico/latino. Sí, es hispánico/latino.

La pregunta susodicha es de la etnicidad y no de la raza. No importa como respondió, sigue y contesta las preguntas acerca de los códigos de etnicidad en la próxima sección por anotar una o más cajas para indicar lo que Ud. considera la raza del alumno o de la alumna.

ETHNIC CODES

What is the student's race? Select one or more.

- AMERICAN INDIAN OR ALASKAN NATIVE:** Origin in any of the original people of North and South America, including Central America, and who maintains tribal affiliation or community attachment.
- ASIAN:** Origin in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, Pakistan, The Philippine Islands, Thailand, and Vietnam.
- BLACK OR AFRICAN-AMERICAN:** Origin in any of the black racial groups of Africa.
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER:** Origin in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.
- WHITE:** A person having origins in any of the original people of Europe, the Middle East, or North Africa.

SPECIAL SERVICES RECEIVED

- Has your child ever received special education services? Yes No If yes, what grades? _____
- Does your child have a current IEP? Yes No If yes, please attach a copy of the most recent IEP.
- Does your child have a current 504 Plan? Yes No If yes, please attach a copy of the most recent 504 Plan.

TESTING

Please check all previous standardized tests your student has taken and attach copies of test results.

- EXPLORE PLAN PSAE/ACT ACCESS OTHER: LIST _____

RESIDENCY VERIFICATION

Generally, Illinois law provides that the residence of a student is deemed to be the same as the residence of the person who has legal custody of the student and permits only students who are residents of Lyons Township High School District 204 to enroll and attend on a tuition-free basis. The person claiming custody must also reside in the district. To assist Lyons Township High School District 204 in confirming residency and legal custody, the enrollment form must be completed, including additional documents. The District may investigate the residency of any student before or after enrollment, and require the involved persons to provide additional information to be considered by District 204 in determining residency. Enrollment is not completed, and attendance will usually not be permitted, until all residency issues are resolved. As initial proof of residency, the person with whom the student lives in the District and who claims custody of the student must attach to this form at least one original document from Category A, a driver's license, state ID or other government-issued photo identification, at least two other documents from Category B, all documents from Category C, all of which must be acceptable to the District. Students who move into the District to live with relatives or friends for the purpose of attending District 204 are not considered legal residents in the District and therefore cannot be admitted to the school. **ONLY DOCUMENTS WITH THE PARENT/GUARDIAN'S LEGAL NAME AND CURRENT ADDRESS LISTED ON THE DOCUMENTS WILL BE ACCEPTED AS PROOF OF RESIDENCY.**

Category A

- Recent Real Estate Tax Bill
- Lease (signed & showing date of occupancy along with cancelled security deposit check and rent receipt and landlord's phone number)
- Closing Statement (signed) if home purchased within last 12 months
- Mortgage Stmt./Payment Book (less than 30 days old)
- Bill of Sale (if purchased within the last 12 months)
- Military Housing Letter

Category B

- Driver's License (copy of both sides if renewed on back) or State I.D. and two additional items of your choice.
- | | |
|---|---|
| <input type="checkbox"/> Homeowners/Renters Insurance | <input type="checkbox"/> Bank Statement (less than 30 days old) |
| <input type="checkbox"/> Photo I.D. from Foreign Consulate | <input type="checkbox"/> Paycheck Stub (less than 30 days old) |
| <input type="checkbox"/> Letter from a Federal/State Agency (less than 30 days old) | <input type="checkbox"/> Auto Registration |
| <input type="checkbox"/> Utility Bill (less than 30 days old) | <input type="checkbox"/> Cable Bill (less than 30 days old) |
| <input type="checkbox"/> Public Aid Card (less than 30 days old) | <input type="checkbox"/> Home Phone Bill (less than 30 days) |

Category C

- Original Birth Certificate with Clerk of the County Seal (Illinois School Code requirement) (Originals will be returned)
- Current record of immunization/physical dated within one year of start of 9th grade
(Incoming freshman for the class of 2016 must have a physical on file by June 1, 2012)
- Illinois State Board of Education Transfer Form if transferring from IL school
- Transcripts from previous high school
- Current schedule from previous high school
- Grades in progress from previous high school

Grounds for Legal Custody: (Check all that apply. If none is applicable, you must check one of the "Exceptions" noted on the form)

1. Custody is exercised by a natural or an adoptive parent with whom the student resides
2. I have a court order giving me custody or guardianship of the student. I have: primary residential or joint custody. Attach divorce decree.
3. Custody has been granted by court order to a person with whom the student resides for reasons other than to have access to the educational programs of the District (Attach copy of court order)
4. Custody is exercised under a court-approved short-term guardianship (Attach copy of court order)
5. Custody is exercised by a caretaker adult relative who is receiving aid under the Illinois Public Aid Code for the student who resides with that caretaker for the purposes other than to have access to the educational programs of this District (Attach copy of Public Aid documents)
6. Custody is exercised by an adult who demonstrates that, in fact, he or she has assumed and exercises legal responsibility for the student and provides the student with a regular fixed nighttime dwelling for purposes other than to have access to the educational programs of this District (Attach notarized affidavit)

Exceptions:

1. The student is homeless and is eligible for enrollment under the Illinois Education for Homeless Children Act
2. The student is a foreign exchange student
3. The student has been placed with a foster parent or child-care facility by the Department of Children and Family Services outside this District, but DCFS has determined it to be in the best interest of the student to maintain attendance in this District. Unless stated differently, the determination is valid for the current school year only (Attach copy of DCFS determination)
4. The student is at least 18 years old and lives in this district on a full and indefinite length-of-time basis
5. The student is under 18, but has been emancipated by court order or marriage and lives in this District on a full and indefinite length-of-time basis (Attach copy of court order or marriage license)
6. Residency will be established within 30 calendar days (Attach a real estate contract, lease or closing statement)

COMPLETION OF ENROLLMENT PROCESS

Please return this Student Enrollment Form (filled out completely) and required materials to the main office of the campus you will attend. All incoming freshmen and transfer students without test scores are required to complete placement testing prior to class scheduling. Test scores will assist both the student and the school counselor in selecting appropriate classes. Incomplete Student Enrollment Forms will be returned to you and may delay the enrollment process.

Transfer students moving into the District must contact the associate principal at the campus they will attend to set up an enrollment meeting. The parent/guardian and the student must attend this meeting. Transfer students must inform the leaving school of their intent to withdraw and complete their withdrawal process. Please request all transfer records and attach to enrollment form.

If any of the above information changes after submission of this document and prior to the start of the 2012-2013 school term, you must inform Lyons Township High School immediately. Please contact the campus your student attends or will attend.

Freshmen & Sophomores

Lyons Township High School
South Campus
Associate Principal Therese Nelson
4900 S. Willow Springs Road
Western Springs, IL 60558
Telephone: 708-579-6500
Fax: 708-588-7473
Email: tnelson@lths.net

Juniors & Seniors

Lyons Township High School
North Campus
Associate Principal Kevin W. Brown
100 S. Brainard Avenue
La Grange, IL 60525
Telephone: 708-579-6300
Fax: 708-579-3187
Email: kwbrown@lths.net

Please return the completed Student Enrollment Form and all required materials to the main office of the campus the student will be attending. As a final check, review your paperwork to make sure it is completely filled out and that you are submitting current documents with the parent/guardian name and current address as proof of residency.

INCOMPLETE STUDENT ENROLLMENT FORMS WILL NOT BE ACCEPTED AND WILL BE RETURNED FOR COMPLETION.