

Kings Consolidated School District 144

100 FIRST STREET KINGS, ILLINOIS 61068-9773

815-562-7191

Matt Lamb - Principal

June 22, 2020

Dear Parents:

Please take some time to look through the enclosed information and make sure everything is still correct on the Student Profile form. If you need to make a change, simply line through the old information & write the new information to the side. Make sure you turn the form over & complete the back side also. The proof of residency form also needs to be returned with documentation from either category 1 or 2. **The following forms all need to be signed and returned to the office via mail, email jhorn@kings144.org, or office drop box by July 31, 2020.**

- ___ **Student Profile** (2-sided)
- ___ **Proof of Residency** (with proof attached)
- ___ **This letter, with payment**

The first day of school is Tuesday, August 18 with a 2:30 PM dismissal.

State law requires schools to notify parents that information about sex offenders and violent offenders against youth is available to the public. The information is available on the Illinois State Police's website. The Sex Offender Registry is at

www.isp.state.il.us/sor

The Child Murderer and Violent Offender Against Youth Registry is at

www.isp.state.il.us/cmvo

Student Fees are as follows:

Kindergarten through 8 th Book Fees early discount (before July 31 th)	\$65.00
Kindergarten through 8 th Book Fees (after July 31 st)	\$85.00
Cost of 1 Lunch (one milk comes with a lunch)	\$2.75

Student Name	Grade	Book Fees	Lunches	Milk	Total

Total Amount Due _____

Total Amount Paid _____

Date _____

Signature _____

PROOF OF RESIDENCY

Name of Student (s) _____ Birth date _____

In order to register your student in Kings School the State of Illinois requires that you provide the school proof of residency. Evidence of proof can be presented in either of two categories.

Evidence of proof of residency presented:

Category I - (one document)

- Real estate tax bill
- Signed lease
- Affidavit from local resident attesting registrant is living with the owner at no cost
- Mortgage papers
- An agreement of sale

OR

Category II - (two documents showing proper address)

- Driver's license
- Voter registration
- Home/apartment insurance papers
- Gas or Electric bill (telephone bill not acceptable)
- Auto registration
- Credit Card Bill
- Public Aid Card

I cannot provide the required evidence for the following reasons (s):

By _____ I will provide the following evidence of my residency.

This proof of residency form is to attest that the above child is not enrolling in the District solely for school purposes and is living on a permanent basis with the person having complete custody and control. Registration of a student who is not a resident is a fraudulent act. Any student found to have been fraudulently registered will be dropped from the attendance rolls immediately. Parents or guardians making a fraudulent registration will be subject to the payment of retroactive tuition charged to non-resident students, not to exceed 110% of the per capita costs. A person who knowingly or willfully presents the District any false information regarding the residency of a pupil for the purpose of enabling that pupil to attend any school in this District shall have committed a Class C misdemeanor and shall be prosecuted by the District.

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

Signature of Parent/Guardian

Date

Relationship

Address of Parent/Guardian

Telephone

PLEASE LIST OTHER SIBLINGS IN THE HOUSEHOLD:

NAME	AGE	GRADE IN SCHOOL
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any additional people living in household _____

LIST ANY SPECIAL HEALTH PROBLEMS:

If you and the physician named cannot be reached in an emergency, and in the judgment of school authorities immediate medical and/or hospital attention is necessary, do you authorize school authorities to take your child to the nearest available hospital or physician?

YES _____ NO _____

SIGNATURE OF PARENT/GUARDIAN

_____ has permission to go on field trips with His/Her class.

_____ has permission to use textbooks obtained through the Illinois Textbook Loan Program

YES _____ NO _____ I give permission to Kings School to give my phone number to the Kings School Community Club.

YES _____ NO _____ I give permission to Kings School to post photos of my student on the district's website, internal electronic and print postings, and local media.

YES _____ NO _____ I give permission to Kings School to administer acetaminophen or ibuprofen to my student if needed.

DATE _____ SIGNATURE _____