

**Manteno CUSD No. 5**  
**STUDENT REGISTRATION AND PROOF OF RESIDENCY QUESTIONNAIRE**

\_\_\_\_\_  
 Student Name (Last) (First) (Middle) Grade Start Date  
 \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Birth Date Gender Birth City Birth State Birth Country Birth County

Hispanic/Latino Ethnicity: Yes No (Circle one)

Race (Circle all that apply): 1. American Indian/Alaska Native 2. Asian 3. Black/African American 4. Pacific Islander 5. White

**\*Family 1 (Student's Primary Residence)**

**\*Primary Guardian:** \_\_\_\_\_  
 Last Name First Name Relationship Marital Status

Custodial Parent – yes no May Pick Up Student – yes no

\_\_\_\_\_  
 Primary Phone (home/cell/work) Phone #2 (home/cell/work) Phone #3 (home/cell/work) Employer

\_\_\_\_\_  
 Home address: Street Apt # City State Zip

\_\_\_\_\_  
 E-mail Address Mailing Address if different from Street Address

**\*Guardian 2:** \_\_\_\_\_  
 Last Name First Name Relationship Marital Status

Custodial Parent – yes no May Pick Up Student – yes no

\_\_\_\_\_  
 Phone #1 (home/cell/work) Phone #2 (home/cell/work) Employer E-mail Address

**\*\*Family 2 (Student's Secondary Residence or non-custodial parent)**

**\*\*Guardian 1:** \_\_\_\_\_  
 Last Name First Name Relationship Marital Status

**May be Contacted in Emergency** – yes no Custodial Parent – yes no May Pick Up Student – yes no

\_\_\_\_\_  
 Primary Phone (home/cell/work) Phone #2 (home/cell/work) Phone #3 (home/cell/work) Employer

\_\_\_\_\_  
 Home address: Street Apt # City State Zip

\_\_\_\_\_  
 E-mail Address Mailing Address if different from Street Address

**\*\*Guardian 2:** \_\_\_\_\_  
 Last Name First Name Relationship Marital Status

**May be Contacted in Emergency** – yes no Custodial Parent – yes no May Pick Up Student – yes no

\_\_\_\_\_  
 Phone #1 (home/cell/work) Phone #2 (home/cell/work) Employer E-mail Address

\_\_\_\_\_  
**Physician** Phone **Dentist** Phone **Hospital**

**Emergency Contact #1**  
 (not home or work for parent) \_\_\_\_\_  
 Name Phone #1(home/cell/work) Relationship

\_\_\_\_\_  
 City Zip Phone #2 (home/cell/work)

**Emergency Contact #2**  
 (not home or work for parent) \_\_\_\_\_  
 Name Phone #1(home/cell/work) Relationship

\_\_\_\_\_  
 City Zip Phone #2(home/cell/work) **(OVER)**

**OFFICE USE ONLY:**

Reg. Fee \_\_\_\_ Bus \_\_\_\_ BC \_\_\_\_ Resid. \_\_\_\_ Record Req. \_\_\_\_ Physical \_\_\_\_ Immun. \_\_\_\_ Lang. \_\_\_\_

**INFORMATION PERTAINING TO FAMILY**

Identity of person completing this questionnaire:

Name \_\_\_\_\_ Relationship to student \_\_\_\_\_

**Has this child ever been tested for special placement, including speech services?** ( ) Yes ( ) No **If yes, for what kind of placement** \_\_\_\_\_

Is this student eligible for Medicaid \_\_\_\_ Yes \_\_\_\_ No Medicaid Number \_\_\_\_\_

Does the student eat \_\_\_\_\_ sleep \_\_\_\_\_ spend weekends \_\_\_\_\_ and summers \_\_\_\_\_ regularly at said residence?  
Yes/No Yes/No Yes/No Yes/No

If the student doesn't live with father or mother, state reason for residence with another person. \_\_\_\_\_

Please list all persons (adults and children) residing with student:

Last Name	First Name	Age	School Attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Names, ages, addresses and school attended of siblings not living with student (under age 18):

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
School Attended: \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
School Attended: \_\_\_\_\_

(Use additional sheets for additional persons.)

Who should be contacted about student's grades, etc.?

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Who is responsible for payment of student fees?

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Has a guardian been appointed for the student? Yes \_\_\_\_ No \_\_\_\_ If so, attach a copy of guardianship petition and court order.

Identity of guardian:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

**NOTE: Illinois law provides that a person who knowingly enrolls or attempts to enroll in the schools of a school district on a tuition-free basis -- a pupil known by that person to be a nonresident of the district -- will be guilty of a Class C misdemeanor. Illinois law also provides that a person who knowingly or willfully presents to any school district any false information regarding the residency of a pupil for the purpose of enabling that pupil to attend any school in that district without the payment of a nonresident tuition charge, will be guilty of a Class C misdemeanor. (105 ILCS 5/10-20.12b)**