2020-2021 Residency Verification Form
Chester Community Unit District #139

PLEASE PRINT

Student Name: _____

Parent Name: _____

Address: **Street** _____

City _____

Gender: **(circle one)** **MALE** **FEMALE**

Date of Birth: _____

Grade: _____

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You must bring this sheet filled out and TWO forms of address verification as noted below with you to registration.

One from this category:	One from this category:	
Real EstateTax Bill	Gas/Electric Bill	Bank Statement
Mortgage Document or Payment Slip	Water/Sewer Bill	Public Aid Card
Signed Lease	Cable Bill	Credit Card Statement
Military Housing letter	Landline phone Bill	Paycheck Stub
Section 8 Letter	Vehicle Registration	Driver License / State ID