BOARD OF EDUCATION, DISTRICT 148
DOLTON, COOK COUNTY, ILLINOIS

STATEMENT OF TEMPORARY CUSTODIAL CARE

Child's Name _____ Date _____

Name of Adult Care Taker _____

Address _____

City/State/Zip _____

Home Phone _____Work Phone _____

The residence of a person who has temporary custody of a student is considered to be the residence of the student.

A person may exercise custody of a child by an adult who demonstrates that, in fact, he or she has assumed and exercises legal responsibility for the pupil and provides the pupil with a regular fixed night-time abode for purposes other than to have access to the educational programs of the district. (105 ILSC 5/10-20.12b v)

Please describe the circumstances that have caused this child to live with you. Include names and dates. Use the reverse side is needed.

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Adult Care Taker's Signature _____

Date _____

R-13
4/05