

APPLICATION FOR VETERANS' CHILDREN EDUCATIONAL OPPORTUNITIES-Part II

◆ SCHOOL INFORMATION

Name of Child _____ Grade of Child _____

Name of School _____

Street Address _____ Office Phone Number _____

City/State/Zip _____

◆ VERIFICATION OF ENROLLMENT OF CHILD

I, _____, hereby certify that the above named child is registered to attend the
Printed Name of Principal or Registrar above named school for the following school year ---

_____ to _____
Month Year Month Year

Signature of Principal or Registrar

Date

TO BE COMPLETED BY SCHOOL OFFICIAL ONLY

◆ PAYEE CERTIFICATION

I, _____, certify that the above named child has been a resident of Illinois for
Printed Name of Payee one year preceding this application and will reside with me during
the current school year. I further state that the foregoing statements
are true and correct to the best of my knowledge.

Signature of Payee

Date

SUBMIT THE FOLLOWING EVIDENCE WHEN APPLICABLE:
BIRTH CERTIFICATE, DEATH CERTIFICATE, ADOPTION DECREES,
LETTERS OF GUARDIANSHIP, AND POWER OF ATTORNEY.

IMPORTANT NOTICE

This state agency is requesting disclosure of information necessary to
accomplish the statutory purpose of ILCS Ch. 330, 105/1. Disclosure
is REQUIRED; failure to provide this information will prevent the
claim from being processed.