



**DUNLAP COMMUNITY UNIT SCHOOL DISTRICT #323**

*Optional: To be completed by the natural or adoptive parent(s), if one is available.*

*Please check all applicable boxes:*

- I am the natural or adoptive parent of the child.
- I have willingly transferred full custody and control of, as well as responsibility for this child to:  
\_\_\_\_\_
- The transfer of custody is not solely for the purpose of attending the District's schools.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of individual completing this form

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Address