



Check Number: _____

Amount: _____

Date: _____

Assistant Superintendent for Business and Operations
Lake Zurich CUSD 95
832 South Rand Road Lake Zurich, IL 60047

Dear Assistant Superintendent for Business and Operations,

I am under contract to purchase or lease a residence within the boundaries of Lake Zurich Community Unit School District 95 and wish to enroll my child/children as a non-resident basis until such time as I become a legal resident of the school district.

The anticipated closing date on my residence is within 61 days at which time I will be a legal resident of the district and my child/children will be entitled to attend District 95 schools as a resident. Attached is my proof of my intended residency in District 95 at _____ (address) in the form of a real estate contract or lease, proof of deposit, or financial commitment letter with the anticipated closing date/lease commencement of _____.

I understand that until my child/children is a legal resident of District 95 my child is being allowed to attend on a tuition basis and are required to pay non-resident tuition. I have read the non-district residency letter and understand my responsibilities for paying tuition. The annual rate for 2026-2027 school year is \$19,331.40. The established service fee, payable at enrollment is \$2,147.93 per child. This service fee will be refunded if I become a legal resident within 31 calendar days or by _____ (to be completed by the school office). I understand that until I can provide verification that I am a legal resident of the District, I am required to pay tuition in advance. All tuition charges are calculated on a per diem basis, credit will not be given for school days in which your child does not attend. Tuition will be payable monthly in advance. Failure to pay tuition on time will result in the revocation of permission to attend Lake Zurich District 95 schools as a non-resident student. I also understand that transportation to and from school is my responsibility until I become a legal resident, at which time consideration will be given for bussing.

1. Please admit my child _____ into grade _____ at _____ effective _____.
2. Please admit my child _____ into grade _____ at _____ effective _____.
3. Please admit my child _____ into grade _____ at _____ effective _____.
4. Please admit my child _____ into grade _____ at _____ effective _____.

Signed,

Signature-Parent or Guardian

Phone

Printed Name-Parent or Guardian

Date

Address

Current Approved admission as tuition paying student:

Assistant Superintendent for Business and Operations

Date

District 95 Administration Center – 832 South Rand Road - Lake Zurich IL 60047

Phone: (847) 438-2831 FAX: (847) 438-6702