

Student Residency Questionnaire

Consistent with the federal McKinney-Vento Assistance Act, **(Name of District)** offers families in transition a stable educational experience for all children. The following information will be used to ensure that all students have a stable school placement and have access to all educational services provided by the school. **To determine if your child is eligible for these services, please complete this Student Residency Questionnaire and return it to the Main Office at your child's school.**

School: _____

Student's First Name: _____ MI: _____ Last Name: _____

Birthdate: _____ Birth Place: _____, _____, _____
City State Country

Birth Sex: Male Female

Address: _____ Apt. No.: _____ City: _____ Zip Code: _____

Parent/Legal Guardian Name: _____ Contact Number: _____

The student lives with:

- 1 Parent A relative
 2 Parents Alone with no adults
 1 Parent & another adult An adult that is not the parent or legal guardian

Student Living Situation (Check all that apply)

- In a homeless shelter _____ (name of the shelter)
 In a hotel or motel _____ (name of hotel/motel)
 In a transitional Housing Program _____ (name of the program)
 In a car temporarily, due to inadequate housing
 In a substandard or rented trailer/motor home on private property
 In a Single Room Occupancy (SRO) Building – a multiple tenant building consisting of individual rooms with shares restrooms and/or kitchens (not an apartment building or one bedroom)
 In a rented garage due to loss of housing (not a converted apartment-like living quarters)
 Temporarily in another family's house or apartment due to loss of housing, due to financial problems (i.e., loss of job, eviction, or natural disaster) – referred to as being "temporarily doubled-up"
 Temporarily with an adult that is not the parent/legal guardian, due to loss of housing
 Substandard housing not designed for, or ordinarily used as a regular sleeping accommodation for human beings (explain) _____
 Living alone without any adult (unaccompanied youth) Living with: _____
 NONE OF THE ABOVE APPLY: No further information is required at this time.

If your housing situation changes, please notify your child's school. We may be able to provide additional assistance.

Signature of Parent/Legal Guardian/Caregiver: _____ Date: _____