

Please return to your student's teacher after filling out this form

## **Student Residency Questionnaire**

*Your child may be eligible for additional educational services through McKinney-Vento Assistance Act.  
To determine your child's eligibility, please complete this form.*

Name of Student: \_\_\_\_\_ Name of School: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_ Sex: \_\_\_\_ Male \_\_\_\_ Female

1. Is the student's current address a temporary living arrangement? \_\_\_\_ YES \_\_\_\_ NO

2. Is this temporary living arrangement due to loss of housing or economic hardship? \_\_\_\_ YES \_\_\_\_ NO

**If you answered YES to both questions, please complete the remainder of this form.**

**If you answered NO to either, you may stop here.**

**Where is the student presently living?** (Check one box)

\_\_\_ Temporarily with another family in a house or apartment due to loss of housing or economic hardship

\_\_\_ With an adult that is not a parent or legal guardian, or alone without an adult

\_\_\_ Moving from place to place

\_\_\_ In a hotel/motel

\_\_\_ Staying in a shelter (family shelter, domestic violence shelter, youth shelter)

\_\_\_ Waiting foster care placement or in a new foster care placement (less than 6 months)

\_\_\_ In a car, park, campground, abandoned building or any other inadequate accommodation

\_\_\_ In an emergency/transitional shelter

\_\_\_ Unknown nighttime residence

\_\_\_ Other \_\_\_\_\_

**Please check your relationship to the student:**

\_\_\_ Parent

\_\_\_ Legal Guardian

\_\_\_ Power of Attorney

\_\_\_ Adult Caring for Student

\_\_\_ Youth living without being in the physical custody of a parent or legal guardian

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**Please list any siblings who DO NOT attend school residing with the student listed above**

<b>Sibling Name</b>	<b>Age</b>

**Signature:** \_\_\_\_\_

*The undersigned certifies that the information provided is accurate.*

**Date:** \_\_\_\_\_

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**School Use Only**

COPIES TO:

1. *District Liaison*
2. *MSDS Data Person*
3. *Building Administrator*
4. *School Counselor*

5. *Food Services*
6. *CA 60*
7. *Classroom Teacher*