

Student Residency Form

This form is required to address the McKinney-Vento Act. Your answers will help district officials determine services your student may be eligible to receive.

Today's date _____

Student 1: First name _____ Last Name _____

Grade in school _____ Birth date (MM/DD/YYYY) _____ Circle one: Male Female

Student 2: First name _____ Last Name _____

Grade in school _____ Birth date (MM/DD/YYYY) _____ Circle one: Male Female

Student 3: First name _____ Last Name _____

Grade in school _____ Birth date (MM/DD/YYYY) _____ Circle one: Male Female

Student 4: First name _____ Last Name _____

Grade in school _____ Birth date (MM/DD/YYYY) _____ Circle one: Male Female

(Additional students in the same household may be entered on the reverse side of this form.)

1. Is your current address a temporary living arrangement? YES NO

2. If YES, is your 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 question, you may STOP HERE.

Where do the student(s) currently live? Must select one:

- Temporarily with another family (due to loss of job, loss of housing, etc.)
- In a motel/hotel
- Moving from place to place
- In a shelter/transitional housing
- Unsheltered (campground, car, park, or other place not designated for permanent housing)

Does the student(s) above live alone without parental support (living independently)? YES NO

Name of parent or legal guardian _____

Please print: First name

Last name

Address _____

Address

City

State

ZIP code

Parent/guardian phone number (_____) _____

Signature of parent or legal guardian _____ **Date** _____