Student Residency Questionnaire Unified School District

This questionnaire is intended to address whether a child is eligible for services provided and required by the McKinney-Vento Act. Your answers will help the administrator determine residency documents necessary for enrollment of this student.

- 1. Presently, where is the student living?
 - □ in a shelter
 - with more than one family in a house or apartment
 - in a motel, car or campsite
 - with friends or family members (other than parent/guardian)
 - none of the above choices apply (You do not need to complete the remainder of this form, if you check this box. Return form to school personnel.)
- 2. The student lives with:
 - □ 1 parent
 - □ 2 parents
 - □ 1 parent & another adult
 - a relative, friend(s) or other adult(s)
 - □ alone with no adults
 - an adult that is not the parent or the legal guardian

School:

Name of Student	Male	Female
Birth Date/Year Age: So	cial Security #_	
Name of Parent(s) Legal Guardian(s)		
Address		ZIP:
Phone/Pager:		
Signature of Parent/Legal Guardian Date:		
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If any of the first four boxes in question #1 were checked, fax this form immediately to the District Homeless Liaison #		
Name and phone number of school contact person who may know of the family's situation:		
Date faxed:		