

## SAMPLE – STUDENT RESIDENCY QUESTIONNAIRE INFORMATION FORM

This information will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

Student \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Last School Attended \_\_\_\_\_

Current Address \_\_\_\_\_

Previous Address \_\_\_\_\_

Number of Children Enrolled in (ABC ISD) \_\_\_\_\_

Is your current address a temporary living arrangement?

Yes or  No

Is this a temporary living arrangement due to loss of housing, economic hardship, or financial difficulties?

Yes or  No

Were you displaced from your home due to a Natural Disaster? (hurricane, fire, flood, tornado, etc.)

Yes or  No

**Type of Natural Disaster:**

Hurricane: \_\_\_\_\_ (Please name)

Other: \_\_\_\_\_ (Please describe)

**Please choose which of the following situations the student currently resides in (choose all that apply):**

House or apartment with parent or guardian

Sharing housing with friends or family members (other than or in addition to parent/guardian)

Motels/Hotels

Shelter or other transitional housing

Unsheltered – in a car, park, substandard housing, etc.

**If you are living in shared housing, please check all the following reasons that apply:**

Loss of housing

Economic hardship

Loss of employment

Parent/Guardian is currently on active duty in the U.S. Military

Other (Please explain; i.e. substandard housing) \_\_\_\_\_

Are you a student living apart from your parents or guardians?  Yes  No

\_\_\_\_\_  
Signature of Parent/Guardian/Unaccompanied Youth/School Representative

\_\_\_\_\_  
Date