



Student Residency Questionnaire 2024-25

School Data Entry:

Date: _____ Print your Name: _____

Codes: Hs _____ C _____ UY _____

This survey is intended to address the requirements of the *ESSA: McKinney Vento Act Title IX, Part A*. The answers to the questions below will assist in determining if your student qualifies for additional educational support services. PLEASE PRINT VERY CLEARLY, COMPLETE ONE FORM PER FAMILY, and return the survey to school's main office. ¿Habla Ud. Español? Por favor llene la encuesta al otro lado de este papel.

Section A: Name of your Child(ren) Enrolled in School (PK–grade 12) or not enrolled in school, including those ages 1-4 (If needed, use an additional sheet of paper) :

1. How many other children/youths are in your household (even if not enrolled in school)? _____

First Name MI Last Name Grade School

First Name MI Last Name Grade School

First Name MI Last Name Grade School

Place an "X" in the appropriate box to answer "YES" or "NO".

Section B: QUESTIONS	YES	NO	Hs CODE
1. My family or one of my school age children lives in a tent campsite (without running water and/or electric), emergency or transitional shelter.			A
2. My family temporarily lives with another family (doubled up) due to loss of housing, economic hardship, or a similar reason.			B
3. My family lives in a location not ordinarily used as a sleeping space such as a car, park, public space, abandoned building, bus station, storage facility, substandard housing or boat at anchor without facilities (running water and/or electric)			D
4. My family lives in a motel or hotel due to lack of alternate accommodations.			E
Section C: QUESTIONS	YES	NO	Hs CODE
1. A child/youth in my home is an <u>unaccompanied youth</u> (not in the physical custody of a parent/guardian).			

Section D (C CODE): If you answered "Yes" to questions 1-4 on Section B, mark the reason below that applies. We lost our home due to:

- | | | |
|---|--|--|
| <input type="radio"/> Man-made Disaster (Major) (D) | <input type="radio"/> Earthquake (E) | <input type="radio"/> Flooding (F) |
| <input type="radio"/> Hurricane (H) | <input type="radio"/> Mortgage Foreclosure (M) | <input type="radio"/> Tornado (T) |
| <input type="radio"/> Pandemic (Major) (P) | <input type="radio"/> Tropical Storm (S) | <input type="radio"/> Awaiting Military Housing (MH) |
| <input type="radio"/> Unknown (U) | <input type="radio"/> Wildfire (W) | <input type="radio"/> Other Homeless Cause (N) |

Parent, Guardian or Unaccompanied Youth's Name (Print): _____

Street Address (Location of House): _____
Street
City
State
Zip

Length of time at this Address: _____

Former Address: _____
Street
City
State
Zip

Home phone: _____ Cell phone: _____ Work phone: _____

Parent or Guardian Signature: _____ Date: _____

Directions for school Data Entry:

For students with a YES response to questions 1-5, enter information into FOCUS under Homeless using the drop-down arrow and select from Homeless Student PK-12 & Homeless Cause. Also select Yes or No under the Homeless Unaccompanied Youth and Homeless Date (enter the date when the form was signed by parent/guardian or student) which serves as the Identification Date. This is VERY Important for free lunch. Complete school data entry date at the bottom of the page and indicate the name/entered by.

PLEASE SCAN THIS FORM INTO FILEBOUND.

Updated: 03/19/2024