

Date _____

**PLACERVILLE UNION SCHOOL DISTRICT
STUDENT RESIDENCY QUESTIONNAIRE**

This document is intended to address the McKinney-Vento Assistance Act.
Your answers will help determine documents necessary to enroll your child quickly.

Student Name – Last		First	Middle
Gender (circle one) M F	Date of Birth:		Grade:
School		Teacher	

1. Is your current address a temporary living arrangement? Yes No
2. Is this temporary living arrangement due to a loss of housing? Yes No Economic Hardship? Yes No
3. Are you enrolling a foster child? Yes No

***If you answered "NO" to all of the above questions, STOP NOW.
If you answered "YES" to any of the above questions, please complete the remainder of the form.***

4. Do you and/or the student live in:
 a shelter
 motel/hotel
 temporarily with another family in a house, mobile home, or apartment
 in a car or RV
 at a campsite
 transitional housing (Hope House, Women's Center, Progress House, Mentor House, Grace Place)
 other location _____
5. The student lives with:
 one parent friend(s)
 two parents an adult that is not the legal guardian
 a qualified relative alone with no adult(s)
6. I am:
 the parent/legal guardian of the above-named student
 a qualified adult relative of the above-named student (relationship: _____)
7. I am a Veteran of the United States Armed Forces (active and/or inactive)

Name of Parent(s)/Legal Guardian/Caregiver	
I can be reached for emergencies at the following address:	
Phone:	Cell Phone:
I receive mail at:	

**** See next page regarding possible rights and protections of students in transition.***

Siblings (include children from 0-21 years)

Name	Age/Grade	School

Note to school staff: Please route a copy of the questionnaire to the Family Resource Coordinator if any answers to questions #1, #2, or #3 are "YES."