



# Student Residency Questionnaire



NCS D School: \_\_\_\_\_

As part of the Every Student Succeeds Act (ESSA), the information on this form is required to meet the federal and state laws governing the education of homeless student's and youth (McKinney-Vento Act 42 U.S.C. 11434a(2)). The answers you give will help the school determine the services the student may be eligible to receive.

**Please check only one box that best describes where the STUDENT is presently living:**

Student living with Parent Yes  No   
 Do you own/rent Yes  No

 **If you answered YES to both questions – STOP HERE!! DO NOT COMPLETE THE FORM.** 

 **If you answered NO to either question above - please proceed.**   
**Fill out both HOUSING and ECONOMIC HARDSHIP columns.**

**HOUSING – The situation that best describes where the STUDENT is presently living (check only one box):**

Student resides with temporary guardian/family member other than parent (this does not include students residing with their permanent guardian)

Living in the home/house/apartment of a friend or relative because I lost my housing. (Example: no job, lost job, fire, flood, divorce, domestic violence, kicked out by my parents, parent in military deployed, parent(s) in jail)

In a shelter because I do not have permanent housing (Examples: living in a family shelter, domestic violence shelter, children/youth shelter, FEMA housing)

In transitional housing (housing that is available for a specific length of time only and is partly or completely paid for by a church, a non-profit organization, or another organization.)

In a hotel or motel (examples: because of economic hardship, eviction, cannot get deposits for permanent housing, flood, fire, hurricane, etc.)

In a tent, car, van, abandoned building on the streets, at a campground, in the park or other unsheltered location.

Incapacity of parent or guardian due to physical health, mental health, drugs/alcohol, or other factors.

None of the above apply. *Briefly describe your situation:*

**ECONOMIC HARDSHIP – Factors contributing to STUDENT'S current living situation (check all that apply):**

Unemployed (no job) resulting in inability to pay rent or mortgage.

Low income from part-time or low paying job does not cover cost of housing in the area.

Loss of mortgage, including loss of mortgage of Landlord if student/student's family is renting.

Home issues: lack of electricity, water, or heat; inadequate home repair due to lack of funds, overcrowding, mold, etc.

Low/fixed income causing economic hardship.

Eviction record and/or inability to produce deposits for rent or utilities.

Lack of affordable housing in the area.

Minor student unable to afford housing on my own.

High medical bills that leave little or no money for housing.

Military: parent/guardian deployed, injured or killed in action.

Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict, incarceration of parent/guardian.

Home fire not due to natural causes (i.e., faulty equipment/appliances/wiring, furnace, stove, fireplace, etc.)

Natural disaster – Tornado, storm, flood, hurricane, wild fire.

None of the above apply. *Briefly explain the contributing factors:*

**Student Information:**

**Name of Student:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Check all that apply that best describes with whom the student resides:**

Parent(s)  Legal Guardian(s)\*  Caregiver(s) who are not legal guardian(s)  Other \_\_\_\_\_  
 (Example: friends, relatives, parents of friends, etc.)

**Name of person with whom STUDENT resides:** \_\_\_\_\_

**Relationship to STUDENT:** \_\_\_\_\_ **Contact Phone Number:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**STUDENT'S Length of Time at Previous Address:** \_\_\_\_\_ **STUDENT'S Length of Time at Present Address:** \_\_\_\_\_

*\*Please note: legal guardianship may be granted only by a court; students living on their own or with friends or relatives who do not have legal guardianship are allowed to enroll in and attend school. The school cannot require proof of guardianship for enrollment or continued attendance for students who qualify for McKinney-Vento (Student's in Transition Program.)*

**Sibling Information:** Please provide information for pre-school and school-age (brothers and/or sisters) of the student:

Name	Grade Level	Gender	School	District

\_\_\_\_\_  
**Signature of Parent/Legal Guardian/Caregiver/Unaccompanied Student** **Date:** \_\_\_\_\_

Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the student under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.002(3)(d).

**FOR SCHOOL USE ONLY:**

Date STUDENT was identified as SIT: \_\_\_\_\_

Date STUDENT entered into Infinite Campus: \_\_\_\_\_

**Housing Status:**

- Living with Friends or Family
- Separated from Family
- Substandard Housing
- Runaway
- Unaccompanied Youth (kicked out of home or abandoned due to pregnancy, LGBTQ issues, family conflicts, parental mental health, or other issues.)

**Living Arrangements:**

- Double-up
- In a hotel/motel
- In Shelter
- Unsheltered (on the street, car, park, campground, abandoned building, trailer, substandard housing)

**District Programs this STUDENT is enrolled in (check all that apply):**

- Special Education       English Language Learner (ELL)       Alternative School

**Services Provided:**

- Transportation (School of Origin)
- School Counseling Support
- Free Breakfast/Lunch Asst. (FRL)
- Hygiene Supplies
- School Supplies Provided
- Tutoring/After School/School Break Program
- Fee Waivers
- Parent Involvement
- Other:

**Community Agency Referral for:**

- Family Issues/Support Service
- Economic Support
- Housing Support
- Domestic Violence Program
- Emergency Clothing
- Emergency Food
- Healthcare/Immunization Referral

**Please send this completed and signed form to the District's Student's in Transition Office. Thank you.**

\_\_\_\_\_  
**School/District Point of Contact Signature**

\_\_\_\_\_  
**Date**