



South Central Community Unit School District 401

Kerry Herdes, Superintendent
Kinmundy, IL 62854
618-547-3414

Schools:
South Central High School
South Central Middle School
South Central Elementary School

Student Nighttime Residency and Resource Questionnaire

Please fill out the following form with the information that is the best of your knowledge.

Name of South Central School (circle): **Elementary** **Middle** **High**

Name of Student: _____
Last First Middle

Gender: Male or Female Date of Birth: ____/____/____ Grade: _____
Month Day Year (Preschool-12)

Phone Number: _____ Email Address: _____

Where is the student currently living? (Please check **ONE** box)

- In a shelter
- With another family or other person because of loss of housing or a result of economic hardship (sometimes referred to as “doubled up”)
- In a hotel/motel
- In a car, park, bus, train, or campsite
- Other temporary living situation (please describe): _____
- In permanent housing with a legal guardian or parent(s)

What resources is the student in need of as of today? (Please mark **ALL** that apply)

Information is for the home liaisons and school counselors to be used only to give resources to students.

- Student would benefit from being enrolled in the **Action Pack Program** (meals given on Friday for the weekend) donated by Kinmundy Christian Church and Kinmundy United Methodist Church.
- Student would benefit from receiving **clothing** from our community closet
- Student would benefit from receiving **food** from the local food pantry the third Saturday of every month.
- Student does **NOT** have access to **internet** service.

Print Name of Parent, Guardian, or student (if 18 & older)

Signature of Parent, Guardian, or Student (if 18 & older)

Date

***Please note that the answers provided above may be used to help district officials in determining services and resources that your student may be able to receive under the McKinney-Vento Act.**