School City of Whiting McKinney-Vento Residency Form

Student Name		Date of Birt	thGrade Level
regu	ılar, and adequa	to Homeless Assistance Act defines "ho ate nighttime residence." This includes of sons due to the loss of housing or econ	omeless" as "individuals who lack a fixed, children who "are temporarily sharing the nomic hardship."
	Does not appl	y; student is not homeless	
Pleas	se check one of the	e following statements if your family is exper	riencing temporary homelessness:
		ter, including transitional housing shelters.	
	Living on the streets, abandoned buildings, in cars, trailers, campgrounds, public places, housing not fit for habitationPlease provide information regarding area in which student is living:		
	Living in hotels/motels for lack of other suitable housing — Please list name and address of hotel/motel:		
	Doubled-up; temporarily living with family or friends due to lack of adequate housing or financial conditions. Please provide address of where student is living: O Address:		
Pleas	se answer the fol	lowing if you checked one of the four box	xes above:
How	long do you exped	ct to be at this address?	
Are you seekingpermanent housing? Date student moved to this address:			
Isap	arent living in the	home with the student?	
If no, with whom is student living?Relationship:			
AMcI	Kinney-Vento Liai	son representing the district may be in contac	et with for clarification or bustransportation.
We ha	ave read the inforn	nation provided & indicated our living circumst	ances above specific to the McKinney-Vento
	Parent/Guardia	n/Unaccompanied Youth Signature	Date
Office	e Use Only:	Does Qualify under McKinney-Vento A	ActDoes NOT Qualify
McI	Kinney-Vento Lia	ison/AppointeeSignature	Date