



Student Residency Questionnaire

Name of School _____

Name of Student _____
Last First Middle

Sex: ☐ Male ☐ Female Student Date of Birth: / / Age _____
Month Day Year

This questionnaire is intended to address the McKinney-Vento Act 42 U.S.C. 11435. The answers to this residency information help determine the services the student may be eligible to receive.

1. Is your current address a temporary living arrangement?
_____ Yes _____ No
2. Is this temporary living arrangement due to loss of housing or economic hardship?
_____ Yes _____ No

If you answered YES to the above questions, please complete the remainder of this form. If you answered NO, you may stop here.

Where is the student currently living? *(Check one box.)*

- | | |
|--|--|
| <input type="checkbox"/> In a Motel | <input type="checkbox"/> With more than one family in a house or apartment |
| <input type="checkbox"/> In a Shelter | <input type="checkbox"/> Moving from place to place |
| <input type="checkbox"/> In a place not designed for ordinary sleeping accommodations such as a car, park, or campsite | |

Name of Parent(s)/Legal Guardians(s) _____

Address _____ Zip _____ Phone _____

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

Signature of Parent/Legal Guardian _____ Date _____

Please send a copy to Dr. Lisa Mumau, Steel Valley School District Homeless Liaison.

