

Student Residency Verification Document

This document is intended to address the McKinney-Vento Act. Your answers will help the administrator determine residency documents necessary for enrollment of this student.

1. Presently, where is the student living? (Check one box)

Section A	Section B
<input type="checkbox"/> In a shelter <input type="checkbox"/> With more than one family in a house or Apartment <input type="checkbox"/> In a motel, car or campsite <input type="checkbox"/> With friends or family members (other than parent/guardian) <p>CONTINUE: If you checked a box in Section A, complete #2 and the remainder of this form</p>	<input type="checkbox"/> Choices in Section A do not apply <p>STOP: If you checked this section, you do not need to complete the remainder of this form. Submit to school personnel.</p>

2. The student lives with:

- | | |
|---|--|
| <input type="checkbox"/> 1 parent | <input type="checkbox"/> a relative, friend(s) or other adult(s) |
| <input type="checkbox"/> 2 parents | <input type="checkbox"/> alone with no adults |
| <input type="checkbox"/> 1 parent & another adult | <input type="checkbox"/> an adult that is not the parent or the legal guardian |

School: _____

Name of Student: _____ Male Female

Birth Date: _____ Age: _____ Social Security # (if appropriate): _____

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

Address: _____ Zip: _____ Phone: _____

Signature of Parent/Legal Guardian _____ **Date** _____

School Use Only – School Administrator’s determination of Section A circumstances:

If the parent has checked Section B above, completion of form is not required. For any choices in Section A, this form must be completed and provided to School Registrar immediately after completion. Form will be kept separately from the Student Permanent Record for audit purposes during the year.

Name and phone number of a school Contact Person who may know of the family’s situation:

Signature

Date