



THE DISTRICT

Student Residency Questionnaire

Name of School: _____

Name of Student: _____ Sex: Male
Last First Middle Female

Birth Date: ___/___/___ Age: ___ Grade: ___ Student ID # _____
Month / Date / 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 presently living? (Check one box.)

- In a motel
- In a shelter
- With more than one family in a house or apartment (doubled up)
- In a place not designed for ordinary sleeping accommodations such as a car, park, or campsite (unsheltered)
- Unaccompanied youth living with friend or relative
- Foster Care (CPS Foster or Kinship placement)
- Other

Name of Parent(s) Legal Guardian(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. 25.00293)(d)

Signature of Parent/Legal Guardian _____ Date _____

Please send a copy to _____ Federal & State Programs _____ at Central Office.

Email JSaenz18@yisd.net or Aguirre4@yisd.net

Official School Use

I certify the above named student qualifies for the Child Nutrition Program under the provisions of the McKinney-Vento Act.

Date

McKinney-Vento Liaison Signature



THE DISTRICT

Homeless Services Provided

Student Name: _____

Grade: _____

Campus: _____

School Supplies (paper, pencils, book bags etc.):

School Uniforms (shirts, pants, shorts etc.):

Clothing (jackets, sweaters, underwear, shoes etc.):

Extended Day:

Transportation:

Medical Services:

Dental Services:

Vision Services:
