

2023-2024 Student Residency Questionnaire McKinney-Vento Students in Transition

Receiving Site:	
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<u>ivickinney-</u>	vento students in 11a	<u>IIISILIOII</u>			
Parent or Guardian	Unaccompanied	l Youth	Relationship to Stude	Relationship to Student:	
Name:	Name:				
Student resides with (name):		Address:	•	Phone:	
		<u> </u>	1		
		you do not need to d	complete or turn in this fo	rm.	
Do you and your student lack a fixed, regular, and adequate night time residence?					
Are you an unaccompanied youth (not in physical			and the day of this fame	Yes r	
•	S YES to any of the questions ab				
Check the box that best describes with whom the student in have legal guardianship are allowed to			rstudents living on their own or with frie nship for enrollment or continued attend		
Parent(s) Legal Guardian(s)	Caregiver(s) who	are not legal guardian(s)	Unaccompanied	l Youth - UY	
Please provide the following information for	all students & siblings in the	household:			
NAMES (Children Birth t	:o 18)	SCHOOL	BIRTHDAY (XX/XX/XXXX)	GRADE	
Please check	only one box that best describe	es where the student/family	is presently living:	<u>. </u>	
Living in hotels, motels, trailer parks or campgrounds du	e to lack of adequate alternative housir	lg	· · · · · ·		
Living in emergency or transitional shelters					
Living in a car, park, public space, abandoned building or	substandard housing (no heat, water,	electricity)			
Sharing housing with other persons due to loss of housing	ng or economic hardship				
Student living apart from a parent/guardian and housing	is not fixed and regular (couch surfing)				
The information on this form is required to meet the law known as the	he McKinney-Vento Act 42 U.S.C. 11434a(2),	which is also known as Title X, Part C,	of the Elementary and		
Secondary Education Act. The answers you give will help the school of			ets the person to liability for tuition or other s	osts	
Presenting a false record or falsifying records is an offense under Sec TEC Sec. 25.002(3)(d).	tion 37.10, Penal Code, and enrollment of Si	dudents under raise documents subjec	cts the person to hability for tuition or other co	OSIS.	
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Signature: Parent, Guardian, Caregiver or	Unaccompanied Student	Date	Site Sender:	M-V:	
PLEASE COMPLETE THIS FORM AND SUBMIT	IT ONLINE OR BRING IT TO SO	CHOOL SITE OFFICE THAN	K YOU!	Rev. 7/2021	
☐ Qualified ☐ DNQ	□ IC □ NS	☐ Transportation ☐	Notified Site		

Student Needs Form

Clothing *Please only complete the items of necessity Jacket/Sweatshirt Clothing **Shoes Size Pants Size Shirt Size Underwear Size Socks Size** Size Student Name(s) Dept. Hygiene *Please only complete the items of necessity Shampoo/Conditioner Hairbrush Other (Please Specify): **Body Wash/Soap Bar** ☐ Comb **Deodorant** ☐ Hair Accessories (i.e. hair ties) Lotion Razor ☐ Sanitary Napkins Toothbrush **Toothpaste Tampons** Other Please list any additional needs your student(s) may have: Your student(s) may be eligible for the following events Yearbook Cap & Gown Records (i.e. birth certificate) *Please select all events you would like your student(s) to Student Name(s) Y/N Height Weight participate in. You will receive more detailed information closer to the event. **Holiday Shopping with a** Step into Spring Shoe Drive Hero (December) (April) **OFFICE USE ONLY** Notes: