

## FNSBSD Residency Questionnaire: Student/Family

Your child may be eligible for additional educational services through the school district and Title I Part A and the McKinney-Vento Homeless Assistance Act. Eligibility can be determined by completing this questionnaire.

## (If any of the following situations apply to you, please check a box and complete the form.)

(If no	ently, are you and/or your far Staying in shelter or waiting Sharing the housing of other Living in a car, park, campg Temporarily living in a moth Other: temporary living situ	g for foster ers due to le round, pubel or hotele uation (Plea	care placement. oss of housing, eco plic space, abandor due to loss of hous ase describe)	onomic hardship ned building, or s sing, economic h	, temporarily doul substandard housi ardship or similar	oled-up. ng. reason.	
2. Stud	ent Information (Please prin	t)					
	First	Middle Initial		Last	Gender	D.O.B.	Grade
School Name:				Date:			
Print Name (Parent / Guardian or Student (for unaccompanied youth)				Signature of Parent or unaccompanied youth			
(Area Code) Phone Number Street /Mailing Address (if available)							
If eligib	ole, your child has the right to	o:					

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  - Enroll without giving a permanent address.
  - Remain in the original school of attendance. Attend a different school if it meets your family's needs.
  - Receive transportation assistance to school and school programs.
  - Immediate school enrollment, even if birth certificates, immunization or school records are not available at time of enrollment.
  - Receive special programs and services, as needed, and as provided to all other children.
  - Have enrollment disputes quickly addressed.

**School Note:** Send completed form to Homeless Liaison, Administrative Center Federal Programs or fax to: 452-3172 For additional blank forms, please contact our office.