



**CARTWRIGHT SCHOOL DISTRICT #83
RESIDENCY QUESTIONNAIRE**

Information contained on this form is confidential and used to determine whether a child or youth meets the definition of homeless under the McKinney-Vento Act. The Education for Homeless Children and Youth (EHCY) program as authorized under Title VII-B of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.). Please note, false claims about living situations may affect enrollment.

SECTION A

Today's Date: _____

Name of Individual completing this form: _____

Relationship to the student: _____

Your telephone number: _____

Your email address: _____

Student name: _____ Birth date: _____

Last school attended: _____ Current grade: _____

Do you have any additional children attending school in our district? YES _____ NO _____

Do you have children of the preschool age? YES _____ NO _____

Please provide information about additional children attending school in our district or of preschool age.

LAST NAME	FIRST NAME	GRADE	SCHOOL	DISTRICT

Address of where the student slept last night:

Is this address based on a temporary living arrangement? YES _____ NO _____

(Examples: hotel, shelter, transitional housing; sharing the housing of others due to loss of housing, economic hardship, or similar reason; car, park, campsite.)

NOTE: If you checked "NO" to the temporary living arrangement, you may STOP here. If you checked "YES", Please continue to the next section.



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SECTION B

Please place an "X" in each situation that describes where the student sleeps at night.

- In a place that does not have windows, doors, running water, heat, electricity, or overcrowded.
- Staying with a friend or relative because of loss of housing, economic hardship, or similar reason (Example: eviction, foreclosure, fire, flood, lost job, divorce, domestic violence, kicked out by parents, ran away from home) What date did you begin staying here? _____
- In a shelter/ transitional housing program (name of agency): _____
What date did you begin staying here? _____
- In an unsheltered location (e.g. tent, vehicle, abandoned building, streets, campground, park, bus/train station, or similar place) Provide the main cross streets of this unsheltered location:

- In a hotel/motel (name of hotel/motel and address) _____
What date did you begin staying here? _____
- With an adult that is not the parent or court appointed legal guardian.
- Alone, not in the care of a parent or court appointed legal guardian.
- None of the above (Please explain): _____

The following signature certifies that the information provided above is accurate. False claims about living situations may affect enrollment.

Signature of person providing information
(Parent/Legal guardian/ caregiver/ Student)

Date

FOR SCHOOL USE ONLY

Please note, the student's cumulative file should not include a copy of this form. Do not make copies of this form. If section B is filled out, please notify the LEA Homeless Education Liaison, and provide the original form to them.

Name of school site personnel who enrolled the student:
