

EARLY ISD - STUDENT RESIDENCY QUESTIONNAIRE

The information on this form is required to meet the law known as the McKinney-Vento Act 42 U.S.C. 11434a(2), which is also known as Title X, Part C, of the No Child Left Behind Act. The act ensures educational rights and protections for children and youth experiencing homelessness. The answers you provide will help the school district determine the services the family may be eligible to receive.

PLEASE PRINT

Student Name: _____
Last First Middle

Date of Birth: _____ Early ISD Student ID #: _____

Early ISD School (enrolled at or enrolling to): _____ Grade: _____

Previous District Attended: _____ Previous School: _____

Sibling Last Name, First Name	Brother/ Sister <small>(Including Step-siblings)</small>	Age	Grade	School	District <small>(If EISD, ID # only)</small>

Parent Name: _____

Primary Phone #: _____

Emergency Contact Name: _____ Phone #: _____

- I am the:
- Parent
 - Legal Guardian (Legal guardianship may only be granted by a court. Documentation may need to be provided)
 - Caregiver/Designated Guardian (Examples: Friends, relatives, parents of friends, etc.)
 - Student and I do not reside with my parent(s)/legal guardian(s).
 - Other: _____

Street Address: _____ Apt. /Room #: _____

City: _____ Zip Code: _____

How long has the student lived at this address? _____

1. Is the above address a temporary living arrangement? YES NO
2. Is your current living arrangement due to loss of housing or economic hardship? YES NO
3. Is your current residence WITHOUT electricity and running water? YES NO
4. Are there multiple families renting rooms/space at this address? YES NO

If you answered YES to ANY of the questions in this section, please sign below and complete the back of this form.

If you answered NO to ALL of the questions in this section, please sign below.



I understand that 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. Texas Education Code Sec. 25.002(3)(d).

 Signature of Parent/Legal Guardian/Caregiver/Designated Custodian/Student

 Date

EARLY ISD - STUDENT RESIDENCY QUESTIONNAIRE cont'd.

Which of the following best describes the student(s) current temporary living arrangement (check one):

- We are staying in a shelter.** (Ex: living in a family shelter, domestic violence shelter, children/youth shelter, FEMA housing)
- We are staying in transitional housing.** (Housing that is available as part of a program for a specific length of time only and is partly or completely paid for by a church, nonprofit organization, governmental agency or another organization)
- We are staying in the home of a friend or relative.**
- We are staying in an unsheltered location.** (Ex: Without running water/electricity, tent, car/truck/van, abandoned building, campground, park, multiple families renting rooms/space causing substandard housing conditions, etc.)
- We are staying in a hotel or motel.** (Ex: economic hardship, eviction, family problems, living conditions, natural disaster, etc.)

Does the following apply? My homeowners insurance is paying for our stay as part of a filed claim

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Factors contributing to the student(s) present living situation (check all that apply):

- Economic hardship:**
 - Loss of job resulting in inability to pay rent/mortgage
 - Income from part-time or low paying job does not cover cost of housing in the area
 - Inability to produce deposits for rent or utilities
 - High medical bills that leave little or no money for housing
 - Other
- Family problems** (Examples: Divorce, domestic violence)
- Living conditions** (Examples: lack of electricity/water/heat, no windows, overcrowding, mold, etc.)
- Natural disaster**
 - Tornado, storm, flood, etc.
 - Hurricane: Name: _____
 - Fire (Examples: prairie, forest, grass, lightning strike etc.)
- Home fire not due to natural disaster** (Examples: faulty equipment /wiring, furnace, fireplace, etc.)
- Lack of resources to afford permanent housing**
- Lack of affordable housing in the area**
- None of the above (briefly explain):** _____

CAMPUSES

If guardian answered YES to any of the questions in the residence information section, please forward a copy by email/interoffice mail/fax to:
Buddie Groom, School Counselor – buddie.groom@earlyisd.net Early Primary 965 Early Blvd./Fax: 325-646-5336

FOR STUDENT SERVICES USE ONLY

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

McKinney-Vento Liaison Signature

Date

PEIMS Indicator: 2 3 4 5 UY Indicator: 3 4

DNQ