



Date: _____

STUDENT RESIDENCY STATEMENT

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.

The School District shall provide an educational environment that treats all students with dignity and respect. Every homeless student shall have equal access to the same free and appropriate educational opportunities as students who are not homeless. This commitment to the educational rights of homeless children, youth, and youth not living with a parent or guardian, applies to all services, programs, and activities provided or made available.

School: Adairville Auburn Chandlers Lewisburg Olmstead Logan County High

Name of Student (PLEASE PRINT): _____ Birth date: _____ Grade: _____

Last school attended: _____ City: _____

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

ALL INFORMATION ON THIS FORM IS CONFIDENTIAL.

If you answered YES to the above questions, please complete the remainder of this form. If you answered NO, you may stop here.

1. Does the student currently live in any of the following situations?

- Sharing the housing of other persons due to: (check one)
 - Long term, cooperative living arrangement to save money, or a similar reason
 - Loss of housing, economic hardship or a similar reason
 - Other (please specify): _____
- In a motel, hotel, campground or similar setting due to: (check one)
 - Lack of alternative adequate accommodations. Please explain: _____
 - Waiting for apartment or house to be ready
 - Other (please specify): _____
- In emergency or other transitional shelter
- Have primary nighttime residence that is a place not designed for or ordinarily used as a regular sleeping accommodation for humans
- In cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings
- None of the above. Please explain your situation: _____

2. How long do you anticipate living at this location? _____

Eligible for any educational and school related activities and services?

- Special Education (IDEA) English Language Learners (ELL) Gifted and Talented Vocational Education Preschool
- Other: _____

Possible Barriers to Education

- School Selection Transportation School Records Immunizations or other medical records
- Other: _____