

## Student/Family Residency Questionnaire

Your child may be eligible for additional educational services through Title I-Part A, Title I-Part C-Migrant and/or the Federal McKinney-Vento Assistance Act (42 U.S.C. 11435). Please complete this form and return it to your child's school.

1. Presently, are you and/or your family living in any of the following situations? Check all that apply.

- (1) Student is sharing the housing with one or more families due to loss of housing, economic hardship, or similar reason.
- (2) Student is temporarily living in a motel or hotel due to loss of housing, economic hardship, or similar reason.
- (3) Student is living in a shelter (family shelter, domestic violence shelter, youth shelter, or transitional housing.)
- (4) Student is living in a car, park, campground, abandoned building, or public place.
- (5) Student is living in a place without adequate facilities (not designed for heat, electricity, water services, etc.)
- (6) Student is seeking enrollment without an accompanying parent (unaccompanied youth).

**If any of the above conditions were checked, please return this completed form to your child's school office.**

2. Please list ALL children currently living with you that are attending any elementary, middle, or high school in Jordan School District. Please also list preschool age children who will be 3 or 4 years old by September 1<sup>st</sup> of the current year.

First	Middle	Last	M/F	Birthdate	Grade	School Name

*Presenting a false record or falsifying records is an offense under Section 73.10, Penal code, and enrollment of the child under false documents subjects the person to liability for tuition of other costs. TEC Sec. 25.003(3)(d). The McKinney Vento Homeless Education Assistance Act ensures rights for students who are homeless.*

3.

Name of parent(s)/legal guardian(s)	Signature	Date
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Address	City/Zip	Phone
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<b>Person completing this form:</b>	<input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Student <input type="checkbox"/> Other (please specify _____)	<input type="checkbox"/> School Personnel (Date/Method): _____ (Phone conversation, personal knowledge, etc.)
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**Parents(s), Guardians(s), or Student:**

- ✓ Please notify the school if your living status changes.
- ✓ If your children qualify for services under the McKinney-Vento Assistance Act they have the right to additional services and support which could include school placement, school supplies, intervention, etc.
- ✓ Please call the Jordan School District Homeless Liaison at 801-567-8308 if you have questions.

**School Personnel:**

- ✓ Please return this form for SKYWARD identification purposes to the Jordan School District Homeless Liaison at Alternative Language Services in the Auxiliary Services Building or call 801-567-8308 for questions.