

2022-2023 Families in Transition [FIT]

Student Residency Questionnaire

Name of Student: _____ Date of Birth: _____
Area School: _____ Grade: _____

Name of parent, guardian, unaccompanied youth, or educational decision-maker:

Name: _____
Address: _____
Phone: _____ Email: _____

Other school-age siblings:

YES NO

Name: _____ Date of Birth: _____
School: _____ Grade: _____
Name: _____ Date of Birth: _____
School: _____ Grade: _____
Name: _____ Date of Birth: _____
School: _____ Grade: _____

Non-school-age siblings living in the home:

Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____

If a child, youth, or unaccompanied youth is **NOT** living in permanent housing, proof of residency and other documents (health, school records, and birth certificates) normally needed at enrollment are **NOT** required. The child, youth or unaccompanied youth must be enrolled immediately (WITHIN 24 HOURS) in his/her school of origin, the school where other children attend that is in the area where the student is currently living (neighborhood school), or another school that the student may attend that is based on a best interest determination. For more information regarding parent and student rights under McKinney Vento, please see your student handbook.

Please answer these questions about your student's residency. The information provided is confidential and protected by the Federal Rights and Privacy Act. We use this information to make sure the rights of the child, youth or unaccompanied youth are met as required by the McKinney Vento Homeless Assistance Act.

1. Is the student's address a temporary living arrangement? YES NO
2. Is the student's living arrangement due to a loss of housing or financial hardship? YES NO

If the answer to either of the above questions is YES, please complete the following:

Where is the student identified above currently living? (Please check one):

- In a shelter (YWCA; Rapid Rehousing; Family Promise; Other _____)
- Doubled-up: Sharing the housing of others due to economic hardship; couch surfing.
- Unsheltered: Sleeping in a car, campground, park or public space due to economic hardship, or in a public place not meant to be used as a regular place for people to sleep.
- Living in a motel/hotel due to economic hardship.
- Unaccompanied Homeless Youth: A youth not living with their parent or guardian.

Do any of the reasons listed below apply to your current housing arrangement (check all that apply):

- Unable to pay mortgage; mortgage foreclosure due to economic hardship.
- Unable to pay for electricity, heat, and/or running water due to economic hardship.
- Other reasons (natural disaster, extreme conflict, unsafe, unhealthy, unsupportive living conditions).

PLEASE CONTINUE ON BACK OF FORM

Last school student attended:

School: _____ District _____

City, state, or zip code: _____

Has the student attended more than one school in the last 24 months due to economic hardship?

YES NO If yes, how many schools has the student attended? _____

Does your student received additional supports in Title I Reading Math Special Education (IEP)

Services requested (NOTE: These services may apply if you qualify under McKinney Vento Assistance Act)

School Enrollment Tuition Waiver Transportation Academic Support
 Family Advocacy (referrals and support for housing, medical, dental, and mental health, child development and social services)

I understand that by marking checkboxes on the prior page and above that MCPS and Missoula housing support services may share information regarding our current housing situation to determine eligibility for and placement with services to help endure my child’s academic success. In addition, I understand that information about my child may be shared with school staff members who share interest in my child’s academic success (e.g., counselors, case managers, teachers, etc.)

Signature:

Person completing this form:

- Parent or Legal Guardian
- Student
- Unaccompanied Homeless Youth (youth not living with their parent or guardian)

OFFICE USE ONLY

FRC/FIT COORDINATOR

DATE

SIGNATURE OF MCPS FIT LIAISON

DATE

ELIGIBLE YES NO