**SALMON RIVER JOINT SCHOOL DISTRICT #243**

**Salmon River Jr-Sr High School**

**Standard Student Residency Questionnaire**

This questionnaire is intended to address the McKinney-Vento Act. Your responses will help the administrator determine residency status for enrollment of this student and whether or not additional support and services may be available to the student.

1. Presently, where is the student staying **at nighttime**? *Check one box*

|  |  |
| --- | --- |
| **Section A** | **Section B** |
|  in a shelter, transitional housing, or awaiting foster care with more than one family in a house or an apartment due to loss of housing or economic hardship  In a temporary trailer, campground, car, or park In a hotel or motel**CONTINUE**: *If you checked a box in* ***Section A,*** *complete #2 and the remainder of this form.* |  Choices in Section A do not apply***STOP***: *If you checked this section, you do* ***not*** *need to complete the remainder of this form. Submit to school personnel. Thank you.*  |

1. The student lives with:

 1 parent

 2 parents

 1 parent & another adult

 a relative, friend(s) or other adult(s)

 alone with no adults

 an adult that is not the parent or the legal guardian

School



Name of Student

 Male Female

Birth Date / / 

 

Age

Social Security #

 (if applicable)

Name of Parent(s) Legal Guardian(s)

Address

Zip

Phone

**Signature of Parent/Legal Guardian Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**



If the parent/guardian has checked Section B above, completion of form is not required. For any choices in Section A, this form must be immediately routed to appropriate personnel. The original form must be kept separately from the Student Permanent Record for audit purposes during the year.

The name and phone number of a school contact person who may know of the family’s situation:

 Date Distributed: