INSERT DISTRICT LOGO

District Personnel: Please assist students and families filling out this form. The form should be included as the top page of registration materials shared with families. Do not simply include this form in the registration packet, because if the student qualifies as residing in temporary housing, the student IS NOT required to submit proof of residence and other required documents that may be part of the registration packet. Please complete the questionnaire for each student in a family.

HOUSING QUESTIONNAIRE

Name of District:						_
Name of School:						_
Name of Student:						_
L	ast	First			Middle	
Gender: Male Female (optional)	Date of Bir	th:/_ month day		Grade: _	preschool - 12	
Address:						
City:		State:	Ziŗ	o:		
entitled to immediate enr proof of residency, school under the McKinney-Vent services.	records, immuniza o Act may also be	ation records, entitled to fre	or birth o	certificate	. Students who a	re protected
In a shelter						
With another family hardship (sometim			f housing	g or as a re	esult of economic	
In a hotel/motel						
In a car, park, bus, tra	ain or campsite					
In another temporary living situation (please describe):						
In permanent housin	g					
PRINT NAME (parent, guard	ian, or student)* dent can sign only if the	ey are an unaccom			ent, guardian, or si	tudent)*
Date:						