RESIDENCY INFORMATION FORM

This questionnaire is in compliance with the McKinney-Vento Act, U.S.C. 42 § 11431 et seq. Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

Student	Parent/Guardic	ın	
School	Phone/Pager		
Age Grade			
Address		City	
Zip Code Is t	his address Temporary or Perr	manent? (circle one)	
Please choose which of the follow House or apartment with p Motel, car, or campsite Shelter or other temporary With friends or family mer	parent or guardian y housing		ose more than one):
If you are living in shared housing Loss of housing Economic situation Temporarily waiting for ho Provide care for a family Living with boyfriend/girlf Loss of employment Parent/Guardian is deplo Other (Please explain)	ouse or apartment member riend	wing reasons that apply:	
Are you a student under the age	of 18 and living apart from y	our parents or guardians?	Yes No
	Residency and Educa	itional Rights	
Students without fixed, regular, a	nd adequate living situations h	nave the following rights:	
even if they do not have being separated or treated? 2) Transportation to the school Access to free meals, Title	he school they last attended of all of the documents normally a ed differently due to their hou ool of origin for the regular sch e I and other educational prog is offered to other students.	required at the time of enro sing situations; nool day;	ollment without fear of
Any questions about these rights of 908-475-5118 or the State Cool			nnine DeFalco at
By signing below, I acknowledge	that I have received and unde	erstand the above rights.	
Signature of Parent/Guardian/Un	attached Youth	Dat	 e
Signature of McKinney-Vento Liais	son	Dat	e