

RESIDENCY INFORMATION FORM FOR THE MCKINNEY-VENTO ACT

Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

Date of Submission: _____ Student Name: _____

School Name: _____ Parent/Guardian Name: _____

Phone: _____ Age: _____ Grade: _____ DOB: _____

Current Address: _____ City: _____ Zip Code: _____

Student SASID Number: _____
School personnel should verify student's SASID number.

1. Please check the current situation in which the student resides.

- House or apartment with parent or guardian (00)
- Shelters/Transitional Living (01)
- Sharing the housing of others due to the loss of housing, economic hardship, or natural disaster (02)
- Unsheltered (Cars, Parks, Campgrounds) (03)
- Hotels/Motels (04)

*Note: If you have selected "House or apartment with parent or guardian" you do not need to complete the remainder of this form.
Please submit this form to school personnel.*

2. Please check the primary cause of the student's housing crisis.

- Eviction/Foreclosure/Cannot afford housing (01)
- Household/Domestic Factors (02)
- Loss or decrease in income/Loss of job/Seasonal Employee (03)
- Natural Disaster (04)
- Pandemic (05)
- Prefer not to answer/Decline (98)
- None of the above (99)

3. If there is an additional cause for the student's housing crisis, please check below.

- Eviction/Foreclosure/Cannot afford housing (01)
- Household/Domestic Factors (02)
- Loss or decrease in income/Loss of job/Seasonal Employee (03)
- Natural Disaster (04)
- Pandemic (05)
- None of the above (99)

4. Are you a student under the age of 21 and living apart from your parents or guardians (please check one)?

- Yes No

Residency and Educational Rights

Students without fixed, regular, and adequate living situations have the following rights:

- Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all of the documents normally required at the time of enrollment without fear of being separated or treated differently due to their housing situations;
- Transportation to the school of origin for the regular school day;
- Access to free meals, Title I and other educational programs, and transportation to extra-curricular activities to the same extent that it is offered to other students.

Any questions about these rights can be directed to the local McKinney-Vento Liaison at the school or the Charter School Institute Liaison.

Parent/Guardian/Unaccompanied Youth: By signing below, I acknowledge that I have received and understand the above rights.

Signature of Parent/Guardian/Unaccompanied Youth

Date – MM/DD/YY

FOR SCHOOL USE ONLY

School McKinney-Vento Liaison: Based on the above information and a brief interview with this family, I attest that to the best of my knowledge the above-named student qualifies for the protection of educational rights and that this student qualifies for the Child Nutrition Program under the provisions of the McKinney-Vento Act. I also attest that this signed form will be submitted to the McKinney-Vento Liaison at the Charter School Institute.

School McKinney-Vento Liaison Signature

Date (mm/dd/yyyy)

School McKinney-Vento Liaison Name Printed

Please submit the Residency Form and signature page to CSI via GDrive.

CSI McKinney-Vento Liaison: I have reviewed the McKinney-Vento Residency information and attestation of the above-named School McKinney-Vento Liaison.

CSI McKinney-Vento Liaison Signature

Date (mm/dd/yyyy)

CSI McKinney-Vento Liaison Name Printed