



## STUDENT RESIDENCY QUESTIONNAIRE

This document is intended to address the requirements mandated with the McKinney-Vento Assistance Act, US.C.A. 42 Section 11302(a). Your answers will help determine documents necessary to enroll your child quickly.

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Gender: \_\_\_\_\_

### 1. The student lives: (Please check all that apply)

- In a shelter – *provide name:* \_\_\_\_\_
- In a motel/hotel – *provide name:* \_\_\_\_\_
- In transitional housing – *provide name:* \_\_\_\_\_
- In a car or trailer, temporarily, due to loss of housing
- At a campsite or park, temporarily, due to loss of housing
- In a place not designed for, or ordinarily used as a regular sleeping accommodation for human beings – *explain:* \_\_\_\_\_
- In another family's home due to loss of housing, economic hardship, or similar reason (ex. renting a room)
- Living in own home, rented or purchased, house or apartment

### 2. The student lives with

- One parent                       A qualified relative                       Friends
- Two parents                       Alone with no adult(s)                       An adult, no parent/guardian

### 3. The student has siblings:

- 0-4 years old                       5-17 years old                       18 years of age or older

By signing this form, I declare under penalty of the laws in the State of California that the foregoing is true and correct and of my own personal knowledge. In addition, I understand that the Buena Park School District reserves the right to verify the above listed residence information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Address/Location: \_\_\_\_\_  
(Number, Street, Apartment Number, City, Zip)

Mailing Address: \_\_\_\_\_  
(If different from above) (Number, Street, Apartment Number, City, Zip)