

**Carlisle Local Schools**

**Student Residency Questionnaire**

This questionnaire is intended to address the McKinney-Vento Act. Your answers will help the administrator determine residency documents necessary of the enrollment of this student.

1. Presently, where is the student living? *Check one box:*

<b>Section A</b>	<b>Section B</b>
<p><input type="checkbox"/> In a Shelter <input type="checkbox"/> With more than one family in house or apartment <input type="checkbox"/> In a motel, car or campsite <input type="checkbox"/> With friends or family members (other than parent or guardian)</p> <p><b><u>CONTINUE:</u></b> If you checked a box in <b>Section A</b>, complete #2 and the remainder of this form.</p>	<p><input type="checkbox"/> Choices in Section A do not apply</p> <p><b><u>STOP:</u></b> If you checked this section, you do not need to complete the remainder of this form. Submit to school personnel.</p>

2. Student lives with:

- 1 parent
- 2 parents
- 1 parent and another adult
- A relative, friend(s) or other adults
- Alone with no adults
- An adult who is not the parent or legal guardian

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

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

Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security # (if appropriate) \_\_\_\_\_

Name of Parent(s)/Legal Guardian(s) \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_

**If parent has checked Section B above, completion of this form is not required.**