

Alcorn School District  
**Student/Family Residence Questionnaire**

Your child may be eligible for additional educational services through Title I Part A, Title I Part C-Migrant, and/or Federal McKinney-Vento Assistance Act. Eligibility can be determined by completing this questionnaire.

<b>1. Presently, are you and/or your family living in any of the following situations? Check all that apply.</b>						
<input type="checkbox"/> A. Temporarily sharing the housing of others due to loss of housing, economic hardship or similar reason						
<input type="checkbox"/> B. Waiting for foster care placement						
<input type="checkbox"/> C. Temporarily living in a motel or hotel due to loss of housing, economic hardship or similar reason						
<input type="checkbox"/> D. Living in a car, park, campground, abandoned building, or other inadequate accommodation						
<input type="checkbox"/> E. Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or FEMA trailer						
<input type="checkbox"/> F. Living alone as a minor student(s) without an adult (Note to office personnel-unaccompanied youth and their adult caregiver should complete the Caregiver Authorization Form to address guardianship issues)						
<input type="checkbox"/> G. Other living arrangement that is not fixed, regular, or adequate						
<b>2.</b>  <b>Go on</b>  		<div style="display: flex; align-items: center; justify-content: center;"><div style="border: 1px solid black; padding: 5px; margin-right: 10px;"><u><b>If you checked any box above please complete the remainder of this form and submit it to school personnel.</b></u></div><div style="text-align: center;"> <u><b>If you did not check any box above, you do not need to complete or submit this form.</b></u></div></div>				
<b>3. Please list all children currently living with you.</b>						
First	Middle	Last	M/F	Birthdate	Grade	School Name

**\*\*\*\*\*Note to office personnel\*\*\*\*\* Any pre-school aged children should be reported to the District Federal Programs Office via the McKinney-Vento Preschool Referral Form.**

**The undersigned parent/guardian certifies that the information provided above is accurate.**

<b>Print Parent/Guardian Name</b>	<b>Signature</b>	<b>Date</b>
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(Area Code) Phone number	Street Address	City	State	Zip
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Your children have the right to:

- ✓ Continue to attend school in the school attended before you became displaced (school of origin).
- ✓ Receive transportation to the school of origin
- ✓ Enroll in school without giving a permanent address and attend classes while the school arranges for a school transfer, immunization records or other documents required for enrollment.
- ✓ Receive the same special programs and services, if needed, as provided to all other children served in these programs.
- ✓ Have enrollment disputes quickly addressed.

The McKinney Vento Education Assistance Act and the ASD Board of Education ensure the educational rights above for all eligible students. If you wish to have a copy of this document, please ask the staff person helping you today to make one.

✓ ASD staff assisting with this process: \_\_\_\_\_  
Name Signature Date

**Copies to:** Please fax a copy to Federal Programs Office 662-286-1396 and student's cumulative folder