

Dearborn Heights School District No. 7

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

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

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

2. I am not interested in receiving support services at this time. **STOP:** *If you checked this section, you do **not** need to complete the remainder of this form. Sign below and submit to school personnel.*

3. The student lives with:

- | | |
|---|--|
| <input type="checkbox"/> 1 parent | <input type="checkbox"/> a relative, friend(s) or other adult(s) |
| <input type="checkbox"/> 2 parents | <input type="checkbox"/> alone with no adults |
| <input type="checkbox"/> 1 parent & another adult | <input type="checkbox"/> an adult that is not the parent or the legal guardian |

School: _____

Name of Student _____ Male Female

Birth Date _____ / _____ / _____ Age: _____ Social Security# _____
Month / Day / Year

Name of Parent(s)/Legal Guardian(s) _____

Address _____ ZIP: _____ Phone/Pager: _____

Signature of Parent/Legal Guardian _____ **Date:** _____

School Use Only – Administrator’s determination of Section A circumstances: