

Norwich City Schools – Student Residency Questionnaire

Name of LEA: Kelly Collins-Colosi

Name of School: High School, Middle School, Perry Browne, Stanford Gibson, BOCES, Other ()

Please complete all areas indicated with a *

*Name of Student: _____
Last First Middle

*Gender: male or female *Date of Birth: / / *Grade:

*Address: _____ *Phone: _____

The answer you give below will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they don't have the documents normally needed, such as proof of residency, school records, immunization records, or birth certificates. Students who are protected under the McKinney-Vento Act may also be entitled to free transportation and other services.

*Where is the student currently living? (Please check one box)

- In a shelter
- With another family or other person because of loss of housing or as a result of economic hardship (sometimes referred to as "doubled-up")
- In a hotel/motel
- In a car, park, bus, train, or campsite
- Other temporary living situation (please describe) _____
- Unaccompanied youth
- In permanent housing


Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the child under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.002 (3) (d)

* _____
Print name of Parent, Guardian, or Student
(for unaccompanied homeless youth)

* _____
Signature of Parent, Guardian or Student
(for unaccompanied homeless youth)

* _____
Today's Date

McKinney-Vento Liaison Signature _____
Student ID# _____ Building# _____ Date _____

Please complete the reverse side of this form 
Only if you are not in permanent housing

STAC ID

STAC-202 HOMELESS DESIGNATION

Designation of School District of Attendance for a Homeless Child

Submitted by: Local Dept of Social Services (DSS) Designated School District of Attendance (PSD)

PLEASE READ THE INSTRUCTIONS ON THE REVERSE BEFORE COMPLETING THIS FORM

1. NAME OF CHILD <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <p style="text-align: center; margin: 0;">LAST NAME</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <p style="text-align: center; margin: 0;">FIRST NAME</p>	2. DATE OF BIRTH <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-around; align-items: center;"> </div> <p style="text-align: center; margin: 0;">MO / DAY / YR</p>	3. GENDER <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-around; align-items: center;"> </div> <p style="text-align: center; margin: 0;">M F</p>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Racial/Ethnic Category of Child (See definitions on reverse side of last page.)

American Ind or Alaskan Native Asian or Pacific Isl. Black Hispanic White

6. GRADE LEVEL FOR WHICH PLACEMENT IS SOUGHT

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7. COMPLETE ADDRESS BEFORE CHILD/FAMILY BECAME HOMELESS

7A. NYS SCHOOL DISTRICT OF ATTENDANCE BEFORE BECOMING HOMELESS

8. COMPLETE ADDRESS OF CURRENT LOCATION -----	DATE CHILD/FAMILY PLACED IN TEMPORARY HOUSING <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-around; align-items: center;"> </div> <p style="text-align: center; margin: 0;">MONTH DAY YEAR</p>
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7B. NYS SCHOOL DISTRICT WHERE LAST ENROLLED

9. DATE DISTRICT OF ATTENDANCE CHOSEN

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MONTH DAY YEAR

8A. NYS SCHOOL DISTRICT OF CURRENT LOCATION

10. DATE PLACED IN PERMANENT HOUSING

|||

MONTH DAY YEAR

9A. NYS DESIGNATED DISTRICT OF ATTENDANCE

One of four school districts may be chosen to provide the education component: the school district of attendance before becoming homeless, the school district where last enrolled, the school district of current location or a school district participating in a Regional Placement Plan. This designation may be changed either prior to the end of the first semester of attendance or within 60 days of making this designation, whichever occurs later.

11. Check the appropriate box if the designated school district of attendance (9A) is different from the district of attendance before becoming homeless (7A) and from the district of current location (8A).

District participating in a Regional Placement Plan OR District where last enrolled (7B) if it is different from the district where last permanently housed (7A) and the district of current location (8A).

12. NAME OF PARENT OR PERSON IN PARENTAL RELATIONSHIP _____ **AREA CODE** _____ **TELEPHONE NUMBER** _____

13. SIGNATURE OF PERSON IN PARENTAL RELATIONSHIP TO CHILD _____ **DATE** _____

IT HAS BEEN REPORTED TO ME THAT THIS CHILD IS UNDER THE AGE OF 21 YEARS AND IS THEREFORE ELIGIBLE FOR EDUCATIONAL SERVICES. THE CHILD HAS BEEN ADVISED OF HIS/HER RIGHT TO DESIGNATE THE SCHOOL DISTRICT OF ATTENDANCE.

14. PRINT NAME OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE _____ **TITLE** _____

15. SIGNATURE OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE _____ **DATE** _____

16. PLACEMENT COUNTY _____ **Local DSS use only** _____ **AREA CODE** _____ **TELEPHONE NUMBER** _____