

**Residency and Foster Questionnaire**

This questionnaire is intended to address the McKinney-Vento Act, and Foster Care placement. Your answers will help determine if the student meets eligibility requirements for services under these Acts.

List all CHILDREN attending Coolidge District schools

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Schools attending: HLR WEST CJHS CHS CAP PRESCHOOL

Current Living Address: \_\_\_\_\_

Is this a temporary living arrangement? Yes or No

Please choose which of the following situations the student currently resides in:

- \_\_\_\_\_ Motel, car, campsite, park, or other public place not suitable for human living
- \_\_\_\_\_ Shelter or other Emergency housing
- \_\_\_\_\_ Emergency housing or Group home due to DCS (Department of Child Services) placement
- \_\_\_\_\_ With friends or family; **other than or in addition to parent/guardian**
- \_\_\_\_\_ With family due to DCS (Department of Child Services) placement
- \_\_\_\_\_ Have open case with DCS (Department of Child Services)
- \_\_\_\_\_ None of the above

If you and the student or just student are living in shared housing, please check all of the following reasons that apply:

- \_\_\_\_\_ Loss of housing due to economic situation
- \_\_\_\_\_ Loss of employment
- \_\_\_\_\_ Natural disaster
- \_\_\_\_\_ Foster care (open DCS case)
- \_\_\_\_\_ Other (Please explain): \_\_\_\_\_

Are you a student living apart from your parents or guardians? Yes or No

\_\_\_\_\_  
*Signature of Parent/Guardian/Unattached Youth* Date: \_\_\_\_\_

Phone #: \_\_\_\_\_