STUDENT RESIDENCY STATEMENT

Please list all of YOUR school-aged children currently living with you. (Please print as stated on Birth Certificate)

Name: _____ Birth date: _____ Grade: _____ School: _____

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Information provided on this form is confidential.

1. Do you live in any of the following situations?
____Sharing housing with other persons due to: (**choose all that apply**)
 Loss of Housing ____, Economic Hardship ____, Evicted____, Foreclosure____, Lost Job____, Separated/Divorced____,
 Fire___, Flood___, Natural Disaster___, Safety Reasons___, Military Parent___, Moved from_____

 Explain: _____

____Long-term living arrangement to save money or a similar reason (**please specify**): _____

____ In a motel, hotel or campground. (**please specify name**):_____
 or a similar setting due to: (**check one below**)
   ___ Lack of alternative adequate accommodations: (**explain**) _____
   ___ A convenient living arrangement or waiting for an apartment or house to be ready.
   ___Other (**please specify**): _____
____ In an emergency shelter, such as domestic violence, homeless shelter, transitional housing, other shelter or agency.
____ A primary nighttime residence, not designed for or ordinarily used as a regular sleeping place for human beings.
____ In cars, parks, public spaces, abandoned buildings, bus/train station or similar setting (**please specify**): _____
____ Substandard Housing, ___Unaccompanied Youth, ____Awaiting Foster Care, ____Migratory Children, ____Group Home
____ None of the above.

2. Who is your family living with?   Friend ____, Grandparent____, Family Member____, other (**please specify**) _____

3. Current Address: _____ Phone Number: _____

4. How long have you lived at this location? _____ How long do you anticipate living here? _____

_____   _____
Parent/Guardian/Unaccompanied Youth (Print Name)   Signature

Date: _____

SCHOOL USE: If a homeless situation is indicated, give the parent/guardian/unaccompanied youth a copy of Form JBC(1)E(2) (Information for Parents, McKinney-Vento Homeless Assistance Act). Fax this completed form to the Homeless Education Liaison at 770-505-3619. Contact the Homeless Education Liaisons at 770-443-8003 ext. 32018 with any questions.
  Book Bag ____, School Supplies _____, Dictionary _____, Toiletries _____, Calculator _____, Clothing _____, other _____.

____ **Approved Homeless**   **Date:** _____   **By:** _____
                                                        Homeless Education Liaison

____ **Denied Homeless**   02/01/13