

HEATH CITY SCHOOL DISTRICT SHARED RESIDENCY FORM

USE THIS FORM IF YOU CAN NOT PROVIDE PROOF OF RESIDENCY **IN YOUR NAME** BECAUSE YOU ARE CURRENTLY LIVING WITH FAMILY OR FRIENDS THAT LIVE IN THE HEATH CITY SCHOOL DISTRICT.

PLEASE NOTE, 2 FORMS OF PROOF OF RESIDENCY **ARE REQUIRED**. ONCE THIS FORM IS COMPLETED, THE 2 PROOFS OF RESIDENCY MAY BE IN THE NAME OF THE PERSON WITH WHOM YOU ARE RESIDING.

Verify current address by providing 2 proofs of residency from the following list: <ul style="list-style-type: none">• Current rental/lease agreement• Deed or closing documents• Current utility (gas, water or electric) bill	Student(s) Name(s)	Building	Grade
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(a) Parent/Guardian Name(s) _____

(b) Name of person with whom you are residing _____

Relationship to the person with whom you are residing _____

Are you residing with the above person(s) due to () loss of housing, () economic hardship or () other reason?

(c) Address where you are residing: _____

(d) Residency Affidavit – to be completed by person listed in (b)

I certify by providing proof of residency as listed above that I am the owner or tenant of the dwelling located at the address listed in (c). I further certify that the persons listed above in (a) actually reside at this dwelling and do not maintain a separate residence. I certify that the above information is true and accurate and acknowledge that the Heath City School District may use any legal means to verify my address. I realize that should any of the above statements be false, I may be liable for any penalties for which the law provides. I further acknowledge that this certification is valid for the current school year.

Signature of Owner/Tenant _____ Date _____

Print Name of Owner/Tenant and Phone Number _____

Sworn to and subscribed before me

Notary Public _____

This _____ day of _____, 20____.

Commission Expires: _____

(e) Oath of Residency – to be completed by parent/guardian registering the student

I, the parent/guardian of the student(s) listed above hereby certify that I have established residency, on a full-time basis, in the Heath City School district and am not maintaining a separate residence. I am aware that the Heath City School District may use any legal means necessary to verify that I am living at the address stated in (c) and acknowledge that if any of the above statements are false, I am liable for any penalties that the law may provide. Further, if any of this information is false or if I move out of the district, my student(s) will be withdrawn immediately.

Signature of Parent/Guardian _____ Date _____

Print Name of Parent/Guardian and Phone Number _____

Sworn to and subscribed before me

Notary Public _____

This _____ day of _____, 20____.

Commission Expires: _____

HEATH CITY SCHOOLS

RESIDENCY INFORMATION FORM

This questionnaire is in compliance with the McKinney-Vento Act. Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

Student _____ Parent/Guardian _____
School _____ Phone _____
Age _____ Grade _____ Date of Birth _____
Address _____ City _____
Zip _____ Is this address temporary or permanent? (Circle one)

Please choose which of the following situations the student currently resides in (you can choose more than one):

- ☐ Housing or apartment with parent or guardian
☐ Motel, car or campsite
☐ Shelter or other temporary housing
☐ With friends or family members (other than or in addition to parent/guardian)

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

- ☐ Loss of housing
☐ Economic situation
☐ Temporarily waiting for house or apartment
☐ Provide care for a family member
☐ Living with boyfriend/girlfriend
☐ Loss of employment
☐ Parent/Guardian is deployed
☐ Other (Please explain) _____

Are you a student under the age of 19 and living apart from your parents or guardians? ☐ Yes ☐ No

RESIDENCY AND EDUCATIONAL RIGHTS

Students without fixed, regular and adequate living situations have the following rights:

1. Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all the documents normally required at the time of enrollment without fear of being separated or treated differently due to the housing situations;
2. Transportation to the school of origin for the regular school day;
3. Access to free meals, Title I and other educational programs, and transportation to extra-curricular activities to the same extent that is offered to other students.

Any questions about these rights can be directed to the local McKinney-Vento Liaison, Kelly Holbrook, 740-238-7100, or the State Coordinator, Ms. Susannah Wayland at (614) 387-7725.

By signing below, I acknowledge that I have receive and understand the above rights.

Signature of Parent/Guardian/Unattached Youth

Date

Signature of McKinney-Vento Liaison

Date