

WAYNE COUNTY BOARD OF EDUCATION
Student Residency Form

School: _____ Date: _____

Student's Name: _____ Birth Date: _____ Grade: _____

The answers to these questions will help determine services a student may be eligible to receive under the McKinney-Vento Act under No Child Left Behind.

1. Is your current address a temporary living arrangement? _____ YES _____ NO

2. Is this temporary living arrangement due to loss of housing or economic hardship? _____ YES _____ NO

**If you answered YES to the above questions, please complete the remainder of this form.
If you answered NO, you may stop here.**

Where is the student presently living? Select one.

_____ Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason.
(example: evicted from home, cannot afford housing, etc.)

_____ In a motel, hotel, campground or similar setting due to lack of alternative adequate housing.

_____ In emergency or transitional shelters such as domestic violence or homeless shelter.

_____ In a primary nighttime residence that is a place not designed for or ordinarily used as a regular nighttime housing for people.

_____ In cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

_____ None of the above.

How long do you expect to live at this location? _____

Parent/Guardian's Signature _____ Date _____

Address _____

Phone or contact number and relationship of contact _____

Students living in homeless situations have certain rights under the McKinney-Vento Homeless Assistance Act under No Child Left Behind. Lisa Smith, Homeless Liaison. lsmith@wayne.k12.ga.us

School computer operators: Please send the form to Jan Ryals, Student Record Coordinator