

Selma City Schools  
**MCKINNEY-VENTO ACT RESIDENCY QUESTIONNAIRE**  
*(One form per family)*

The Selma City Schools District wants to make sure that your child receives the best possible education. The information from this form will help to determine if your student is able to receive benefits under the federal McKinney-Vento Act, a law that helps students who are temporarily displaced from their home for certain reasons.

A student qualifies for the McKinney-Vento Act if they lack a fixed, regular and adequate nighttime residence. Specifically, if a student lives under any of these conditions:

- a house or apartment with more than one family because of economic hardship or loss
- a shelter (family, youth or domestic violence shelter or transitional living program)
- a motel, hotel or weekly rate housing
- an abandoned building, in a car, at a campground, on the street, etc.
- substandard housing (without electricity, heat or water)
- with friends or family because the youth is a runaway or unaccompanied youth

**PLEASE DO NOT** complete this form if your housing **DOES NOT** meet one of the conditions listed above. If you rent, share housing for convenience, or if you are buying a house and do not need support services, your students **DO NOT** qualify for the McKinney-Vento Act.

**STUDENT INFORMATION**

**School-Aged AND Non School-Aged Children - List ALL children in your family, please PRINT or TYPE**

Name	Student ID	D.O.B.	M/F	Grade	School

**HOUSING INFORMATION**

Where is the student(s) living at this time? *(Please check all that may apply)*

- An emergency or transitional shelter  
 Temporarily with another family due to loss of housing, economic hardship or similar reason  
 A vehicle of any kind, trailer park or campground, abandoned building or other substandard housing  
 A hotel/motel due to loss of housing, economic hardship or similar reason

Reason for temporary living: *(If due to COVID-19, please check additional reasons)*

- Foreclosure       Tornado       Tropical Storm : Storm Name: \_\_\_\_\_  
 Eviction       Earthquake       Hurricane : Storm Name: \_\_\_\_\_  
 Unemployment       Flooding       Man Made Disaster  
 Fire       Wildfire       Other : \_\_\_\_\_  
 COVID-19

The student(s) is/are *(Check 1 only)*:

1.  in the physical custody of a parent or legal guardian
2.  NOT in the physical custody of a parent or legal guardian (ex: living alone, with a relative who is not their legal guardian, living with other people, etc.) . If you checked #2, please provide the following information:

Student Contact Information for Unaccompanied Youth:

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**PARENT/GUARDIAN/CAREGIVER CONTACT INFORMATION**

Parent/Guardian/Caregiver Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Temporary address or location of housing: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Language Spoken: \_\_\_\_\_

How long has/have the student(s) been in the TEMPORARY place? \_\_\_\_\_

**SIGNATURES**

**The undersigned certifies that the information provided is accurate.**

\_\_\_\_\_  
 Name of the Person Completing This Form (print)

\_\_\_\_\_  
 Signature of the Person Completing This Form      Date

