

# Gilmer ISD Student Residency Questionnaire

---

Answers to this residency questionnaire help determine the services the student may be eligible to receive. This form is adapted from what Texas has found useful to identify students in homeless situations as required by the McKinney-Vento Homeless Assistance Improvements Act, 42 USC 11435. Please update this form to reflect the needs and specific information necessary pertaining to your district.

Name of Student: \_\_\_\_\_ Sex: Male \_\_\_ Female \_\_\_

Name of School: \_\_\_\_\_ Grade \_\_\_\_\_

Birth Date: \_\_\_ / \_\_\_ / \_\_\_ Age: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Name of Parent(s)/Legal Guardians(s):  
\_\_\_\_\_

1. Is your current address a temporary living arrangement?  Y  N
2. Is this temporary living arrangement due to loss of housing or economic hardship?  Y  N
3. Is this a CPS placement (safety plan or kinship placement)?  Y  N

**If you answered NO to all 3 questions, you may stop here, but if you answer yes, please fill out the remainder of form.**

### Where is the student presently living? (Check one box.)

- In a motel  In a shelter  With more than one family in a house or apartment  Moving from place to place  CPS Placement (safety plan or kinship placement)  car, park, or campsite

### Is the reason for the temporary living arrangement due to any of the following:

- Disaster (fire, flood, tornado, hurricane, etc.)  
 Home issues (no electric/water)  
 Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict?  
 Incarceration of parent/guardian  
 Parent or Guardian incapacitated due to health, mental health, drugs/alcohol/or other factors  
 Loss of job resulting in inability to pay rent/mortgage  
 Income from job does not cover cost of housing in the area  
 Eviction record and unable to make deposits for housing/electricity/or water?  
 High medical bills  
 Minor student unable to afford housing  
 None of the above describe my current situation

Is the student in a night time residence **with** a parent? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the student living with a friend/relative **without** parents? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# Gilmer ISD Student Residency Questionnaire

---

For Admin office use only: Indicator: \_\_\_ 0 (no) \_\_\_ 1 (shelter) \_\_\_ 2 (doubled) \_\_\_ 3 (unsheltered) \_\_\_ 4 (motel)

\_\_\_ 3 (not unacc) \_\_\_ 4(Unacc)

Email/Send copy of form to Counselor     Email/Send copy of form to PEIMS     Email/Send copy of form to Food Service

Email/Send copy of form to Director of Student Services

Siblings: \_\_\_\_\_ Campus: \_\_\_\_\_ Grade: \_\_\_\_\_

Siblings: \_\_\_\_\_ Campus: \_\_\_\_\_ Grade: \_\_\_\_\_

Siblings: \_\_\_\_\_ Campus: \_\_\_\_\_ Grade: \_\_\_\_\_

Siblings: \_\_\_\_\_ Campus: \_\_\_\_\_ Grade: \_\_\_\_\_

---

Campus Registrar \_\_\_\_\_ Date \_\_\_\_\_

---

McKinney-Vento Liaison/Representative \_\_\_\_\_ Date \_\_\_\_\_

Notes about the situation and services that might be offered:

---

---

---

---

---

---

---

---

---

---