

Calhoun County School District
STUDENT RESIDENCY INFORMATION

This survey is intended to address the requirements of No Child Left Behind Act: Title X/Part C and Title I/Part C. The answers to the questions below will assist in determining if your child qualifies for additional educational support services. **PLEASE COMPLETE ONE PER FAMILY, and return to your child's school.**

Signature of Person Completing this form: _____			
	YES	NO	CODE
1. My family lives in an emergency or transitional shelter or FEMA trailer.			A
2. My family is sharing the housing of others due to loss of housing, economic hardship, or a similar reason, we are doubling up.			B
3. My family is living in a car, temporary trailer park, campground due to lack of alternative accommodations, public space, abandoned building, substandard housing, bus or train station, public or private space not designed for human beings or a similar setting.			D
4. My family lives in a hotel or motel.			E
5. A student lives with my family who is a child/youth awaiting foster care placement.			F
6. I am an unaccompanied youth –a youth not in the physical custody of a parent or guardian or alone without an adult.			Y/N
7. My family has moved in the past 3 year to seek work as a paid laborer in any type of farming (sod, dairy, chicken, vegetable, citrus or other) or fishing?			
If you marked "YES" to questions 1-7, please indicate the cause by checking the appropriate box(es)			
<input type="checkbox"/> Mortgage Foreclosure <input type="checkbox"/> Natural Disaster-Flooding <input type="checkbox"/> Natural Disaster-Hurricane <input type="checkbox"/> Natural Disaster-Tornado			
<input type="checkbox"/> Natural Disaster-Tropical Storm <input type="checkbox"/> Natural Disaster-Wildfire or Fire <input type="checkbox"/> Man-made Disaster (Major)			
<input type="checkbox"/> Natural Disaster-Earthquake			
<input type="checkbox"/> Other-lack of affordable housing, unemployment or underemployment, domestic violence, force eviction, etc			
If you answered "YES to any question above, please complete the remainder of this form. If you answered "NO" to all the questions above, STOP HERE.			

Please list the names of students enrolled in the Calhoun County School District.

First Name	Last Name	Date of Birth	School	Grade

Name of Parent or Guardian: _____

Street Address: _____

Mailing Address: _____

Telephone: _____ Cell Phone: _____ Work Phone: _____

School Personnel: Fax Form with positive responses to any question, Vicki Davis, 850-674-5814.
 Based on the above information and a brief interview with this family (where applicable), I attest that to the best of my knowledge, the family meets eligibility under the McKineey-Vento Act and/or Title I, Part A/C.

Signature of School Contact _____ Date _____