

All information obtained for this purpose will remain confidential. One form per student enrolled is required.

## DISTRICT STUDENT RESIDENCY QUESTIONNAIRE Page 1 of 2

Name of student: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_\_\_

Campus Attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Yes  No Is your current address a temporary living arrangement?

Yes  No Is your temporary living arrangement due to loss of housing or economic hardship?

If you answered **NO** to both of the questions above, **DO NOT** complete the rest of the form. Sign and submit the form.

If you answered **YES** to either of the questions above, proceed to Section A, complete the rest of the form.

### Section A – Student Living Situation (Check all that apply)

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Live with parent/legal guardian in a home, apartment, or housing and does not share home with any other family   |
| <input type="checkbox"/> | Live in a shelter because I do not have permanent housing (family shelter, domestic violence shelter, children/youth shelter, FEMA housing), includes living in transitional housing (housing available for a specific length of time only and partly paid by a Church or other organization). |
| <input type="checkbox"/> | Live in the home of a friend or relative because I lost my housing (doubled up due to economic hardship, fire, flood, lost job, divorce, domestic violence, parent in military and was deployed, parent in jail, etc.)   |
| <input type="checkbox"/> | Live in a tent, car, van, abandoned building (living on the streets, campground, park, or unsheltered location), includes living without electricity, heat, and/or running water in a home/apartment.  |
| <input type="checkbox"/> | Live in hotel or motel (due to economic hardship, eviction, flood, fire, hurricane, etc.)  |
| <input type="checkbox"/> | Unaccompanied Youth (student is not living in the home of a parent or legal guardian)  |
| <input type="checkbox"/> | Child or youth placed by DFPS with a temporary guardian (DFPS provided a Parental Child Safety Plan or Authorization for Non-Parent or Voluntary Caregiver)  |
| <input type="checkbox"/> | None of these describe my present living situation. Briefly describe your situation:   |

### Section B – Factors contributing to the student’s current living situation (Check all that apply):

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Natural disaster  |
|                          | <input type="checkbox"/> Tornado, storm, flood, etc.                          |
|                          | <input type="checkbox"/> Hurricane, name: _____                               |
|                          | <input type="checkbox"/> Fire: prairie, forest, grass, lightning strike, etc. |

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**Section B – Factors contributing to the student’s current living situation (Check all that apply):**

|                          |  |                          |  |                          |  |                          |   |                          |  |
|--------------------------|--|--------------------------|--|--------------------------|--|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | Family issues such as divorce, domestic violence, kicked out by parents, student left due to family conflict, etc.   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Home issue such as lack of electricity, water, heat, adequate home repair due to lack of funds, overcrowding, mold, etc.   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Military: Parent/guardian deployed, injured or killed in action  |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Incarceration of parent/guardian   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Incarceration of parent or guardian due to health, mental health, drugs/alcohol, or other factors  |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Home fire not due to natural causes (i.e., faulty equipment/appliances/wiring, furnace, stove, fireplace, etc.   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Economic hardship: <table border="1" style="width: 100%;"> <tr> <td><input type="checkbox"/></td> <td>Loss of job resulting in inability to pay rent or mortgage</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Income from part-time or low paying job does not cover cost of housing in the area</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Loss of mortgage, including loss of mortgage of landlord if student/student’s family is renting</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Eviction record and/or inability to produce deposits for rent or utilities</td> </tr> </table> | <input type="checkbox"/> | Loss of job resulting in inability to pay rent or mortgage | <input type="checkbox"/> | Income from part-time or low paying job does not cover cost of housing in the area | <input type="checkbox"/> | Loss of mortgage, including loss of mortgage of landlord if student/student’s family is renting | <input type="checkbox"/> | Eviction record and/or inability to produce deposits for rent or utilities |
| <input type="checkbox"/> | Loss of job resulting in inability to pay rent or mortgage   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Income from part-time or low paying job does not cover cost of housing in the area   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Loss of mortgage, including loss of mortgage of landlord if student/student’s family is renting  |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Eviction record and/or inability to produce deposits for rent or utilities   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | High medical bills that leave little or no money for housing   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Lack of affordable housing in the area   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | Minor student unable to afford housing on my own   |                          |  |                          |  |                          |   |                          |  |
| <input type="checkbox"/> | None of the above describe the main reason for my present living situation.<br>Briefly explain the contributing factors:   |                          |  |                          |  |                          |   |                          |  |

**Section C: Parent/Legal Guardian/Caregiver/Unaccompanied Youth**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Relationship to Student: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**Student’s length of time at present address:**

\_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days    Number of children enrolled in district: \_\_\_\_\_

**Please provide the following information for school-age siblings (brother and/or sisters) of the student:**

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