## DENTON INDEPENDENT SCHOOL DISTRICT STUDENT RESIDENCY QUESTIONNAIRE 2012-2013

	dent:	First	Middle Initial	Male     Female	
Birth Date: Grade: Month / Day / Year		_ Campus: Student ID#:			
Name of per	son with whom student resides:				
Address:			_City:	ZIP:	
Cell Phone: _		Emergency Contact & Num	ber:	re familu)	
			Last School Attended:		
		E STUDENT: (Please	check the one that a	nnlies)	
		•			
	Live in a shelter (Examples: Living in a family shelter, domestic violence shelter, children/youth shelter)				
	Live in a motel (Examples: Economic hardship, eviction, cannot get deposits for permanent home, flood, and fir				
	Live in a car, tent, van, abandoned building, on the streets, at a campground, in the park				
	None of the above describes my present living situation. <i>Briefly describe your</i> situation:				
he student l					
	Parent(s)		Legal gua	rdian(s)	
		al guardian		h no adult(s)	
am:					
	The parent/legal guardian of t	he above-named studer	t		
	<ul> <li>A qualified adult or relative of the above-named student (Relationship :)</li> </ul>				
		blings in other DISD s			
Name		Grade	School		
I declare unde	r penalty of perjury under the laws of	this state that the informati	on provided here is true ar	nd correct and of my own perso	
knowledge.				,	
Signature: _			Date:		

 McKinney-Vento Liaison Signature
 Date-Effective/Faxed/Emailed

 I certify the above named student qualifies for the Child Nutrition Program under the provisions of the McKinney-Vento Act
 I certify the above named student qualifies for the Child Nutrition
 I transportation
 I Social Services
 I School Supplies

 Please fax SRQ to 369-4985 or email to ndobson@dentonisd.org and bhaflich@dentonisd.org