## PLEASE CHECK IF ANY OF THE FOLLOWING APPLY

\_\_\_HOMELESS \_\_\_\_MIGRANT \_\_\_\_EMANCIPATED MINOR

(Verification forms will be needed)

1. Is your current address a temporary living arrangement? Yes No

2. Is this temporary living arrangement due to loss of housing or economic hardship? Yes No

## YOUR SIGNATURE IS REQUIRED WHETHER YOU CIRCLED YES OR NO BELOW

If you answered YES to the above questions, please complete the remainder of this form. If you answered NO, you may stop here.

1 Where is the student pro	contly living? (Chook one.)	
	sently living? (Check one ) otel	
	d location of shelter	
	family in a house, mobile home, or apartm	nent
Moving from place to		TOTAL
	ed for ordinary sleeping accommodations	s such as a car park or campsite
	Briefly describe your present living situation	
2. How long do you anticip	ate living at this location?	
2. Chack one that best des	cribes with whom the student resides.	
Parent(s) Mother Father Both Mother and Father		
Legal guardian: Relat		
	e not legal guardian(s): friends, relatives, բ	
Other	; not legal guardian(s). mends, relatives, p	parents of menus, etc.
	hom student resides:	
Address		
City Zip		
Home Phone #	Cell Phone #	Other Emergency #
Military: Parent/guardia Incarceration of parent/ Incapacitation of parent/ Death of parent/guardia Home fire not due to na Natural disaster/Act of na	Vguardian due to health, hospitalization, mentain tural causes: faulty equipment/appliances/wirinature: tornado, storm, flood, etc.  as of income  bills that leave little or no money for housing art-time or low paying job does not cover cost t(s)  Briefly explain ing in the area of afford housing on my own	al health, drugs/alcohol, etc. ing, furnace, stove, fireplace, etc. of housing
dealing with the problems of hom	McKinney Homeless Assistance Act became law. The elessness in America. The McKinney-Vento Act, as outlines the rights of homeless students.	

Date

Signature of Parent/Legal Guardian/Caregiver/Unaccompanied Student