

## Lambert School District 86&4 **Student Residency Questionnaire**

| Name of Student:   | Date of Birth:   |
|--|--|
|  | (mm/dd/yyyy)   |
|  | th that does not live with a parent or guardian)   |
| Name:  |  |
| Email:   |  |
| Please answer these questions about the student's residency. The law called the Federal Education Rights and Privacy Act. We us attend. We also use this information to make sure the rights of law called the McKinney-Vento Homeless Assistance Act. |  |
| <ol> <li>Is the student's address a temporary living arrangement?</li> <li>Is the student's living arrangement due to loss of housing or fit</li> </ol>  | nancial hardship?  |
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| Last school the student attended:  |  |
| School:  | District:  |
| City:  | State:   |
| Name of Parent, Guardian or education decision maker:  |  |
| N.   | g:   |
| Name   |  |
| NameAddress:   | Signature:   |
| City:  | Signature:   |
| Home Phone:  | Work Phone:  |
| Cell Phone:  | Email:   |
| OR   |  |
| Student (if an unaccompanied youth that is homeless):  |  |
|  | Signature:   |
| Address:   |  |
| Email:   | Phone:   |
| records, etc.) normally needed for enrollment are NOT required. The immediately in his or her school of origin, the school where other cliving, or another school that the student may attend based on what  | children attend that is in the area where the student is currently is best for the student.  |
| OFFICE I   | USE ONLY   |

District Representative:

Eligible: ☐ Yes

□No

Date Completed:

Comments: