

# Martha's Vineyard Public Schools

## McKinney-Vento Eligibility Questionnaire

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

This questionnaire is intended to address the McKinney-Vento Act 42 U.S.C. 11435. The answers to this residency information will help us to determine the services your child may be eligible to receive.

1. Is your current address a **temporary/ emergency** living arrangement? Yes \_\_\_ No \_\_\_

2. Is this living arrangement due to loss of housing, economic hardship or similar reasons? Yes \_\_\_ No \_\_\_

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

Where is the student presently living? (Check one box.)

In a motel

In a shelter

With a family member, friend or acquaintance

Moving from place to place

In a place not designed for ordinary sleeping accommodations (ex. car, park, campsite, basement, floor, living room)

Other \_\_\_\_\_

Name of Parent(s) / LegalGuardians(s): \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_