



CENTRAL CONSOLIDATED SCHOOL DISTRICT

P.O. Box 1199 | US Hwy. 64 Old High School Rd. Shiprock NM 87420

Administration Phone: (505) 368-4984 • Fax (505) 368 - 5232

NEW MEXICO STUDENT RESIDENCY FORM

Your child may be eligible for additional educational services depending on your housing situation. Additional services and rights include the right to stay at the same school even if you move, school supplies, clothing, and transportation. Eligibility can be determined by completing this questionnaire.

This form is to learn more about your family's current housing situation. Please begin by signing and completing your contact information. Your signature indicates that you have completed this form to the best of your knowledge.

Print Applicant Name Signature Date

(Area Code) Phone number Mailing Address City State Zip

Relationship to the student(s) listed below: _____

Student Information

Student(s) Name			Gender	Date of Birth	Grade	School Name	Student State ID
First	Middle	Last					

Please select from the following:

Section A

- 1A. Do you live in my own home (rent or own) with immediate family (spouse/partner, children, parent(s))? Yes No
If answered yes move to 1B below. If answered No move to Section B
- 1B. Does the student(s) have running water, electricity, or heat? Yes No
If you answered yes, please return this from without completing the remaining sections. If you answered No please move to Section B.

Section B

- Rent in a temporary space (for example: motel, hotel, trailer park or campground)
Name & Location: _____
- In a place that lacks water, electricity, or heat; is infested with vermin or mold; lacks working kitchen or a working toilet; presents unreasonable dangers to adults, children, or persons with disabilities.
Name & Location: _____
- In a temporary shelter or other temporary housing
Name & Location: _____

Section B continued on page 2.

Section B Continued

- 24-hour substitute Foster Care for children placed away from their parents/guardians.
- Temporarily living with another family.
• Who rents/owns the home/apartment? Self/Applicant Other: _____
- Unaccompanied Youth (without a parent or legal guardian) living in the above circumstances
Person you are currently living with: _____
Relationship to you: _____
- Other: _____

If you have selected from Section B please answer all of the following questions.

1. Why are you staying in your current situation? *Please explain:*
2. Is your current living situation a permanent arrangement or just temporary? *Please Explain:*
3. How long have you been living at the current residency? _____
4. Where does the student(s) sleep? If in a room, how many people sleep in that room?
5. Where were you living right before this place? Why did you leave? How long did you stay there?
6. Have you moved in the last 3 years to work as a paid laborer in any type of farming (sod, dairy, chicken, vegetable, citrus, or other) or fishing? No Yes
7. You may be contacted by a member of your school system's educational support staff. Please check the box below if you do **NOT** wish to be contacted. **No, please do not contact me.**

----- **Official Use Only** -----

Does Qualify Does NOT Qualify Date Received: _____

Was the named students entered into STARS data base: No Yes

Homeless Liaison Signature: _____ Date: _____

Please email complete forms to Alyssa Chavez, District Homeless Liaison at chava@centralschools.org.
For more information please call Phone: (505) 598 – 4534 | Cell: (505) 793 – 2588