

**Sharon Springs Central School District**

Name of Student: \_\_\_\_\_  
                                    Last                                    First                                    Middle

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

Gender:  Male      Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Grade: \_\_\_\_  
                   Female                   Month    Day    Year                    (preschool-12)

**The answer you give below will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they don't have the documents normally needed, such as proof of residency, school records, immunization records, or birth certificate. Students who are protected under the McKinney-Vento Act may also be entitled to free transportation and other services.**

**Where is the student currently living?** (Please check one box.)

- With another family or other person because of loss of housing or as a result of economic hardship (sometimes referred to as “doubled-up”)
  - In a hotel/motel
  - In a shelter
  - In a car, park, bus, train, or campsite
  - Other temporary living situation (Please describe): \_\_\_\_\_
- In permanent housing

\_\_\_\_\_  
**Print name** of Parent, Guardian, or  
Student (for unaccompanied homeless youth)

\_\_\_\_\_  
**Signature** of Parent, Guardian, or  
Student (for unaccompanied homeless youth)

\_\_\_\_\_  
**Date**

**NOTE TO SCHOOLS/LEAS:** If the student is **NOT** living in permanent housing, please ensure that a Designation Form is completed.

## FORMULARIO DE INSCRIPCIÓN – CUESTIONARIO DE RESIDENCIA

Nombre del Distrito Escolar: \_\_\_\_\_

Nombre de la Escuela: \_\_\_\_\_

Nombre del Estudiante: \_\_\_\_\_

Apellido

Primer Nombre

Segundo Nombre

Género:  Hombre

Mujer

Fecha de Nacimiento: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Mes*

*Día*

*Año*

Grado: \_\_\_\_\_ ID#: \_\_\_\_\_

*(jardín de infantes – 12)*

*(opcional)*

Dirección: \_\_\_\_\_

Teléfono: \_\_\_\_\_

Su respuesta abajo permitirá al distrito escolar definir los servicios que puede aprovechar su hijo/hija según el Acto de McKinney-Vento. Los estudiantes elegibles tienen derecho a la inscripción inmediata en la escuela, aun si ellos no tienen los documentos necesarios tales como: prueba de residencia, documentos escolares, documentos de inmunización, o partida de nacimiento. Los estudiantes elegibles según el Acto de McKinney-Vento tienen además derecho al transporte gratuito y otros servicios que ofrece el distrito escolar.

¿Dónde está el estudiante viviendo actualmente? (Por favor marque una caja.)

- En un refugio
- Con otra familia o otra persona debido a la pérdida del hogar o a dificultades económicas
- En un hotel/motel
- En un carro, parque, autobús, tren, o camping
- Otra vivienda temporal (Por favor describa): \_\_\_\_\_
- En un hogar permanente

\_\_\_\_\_  
Nombre de Padre, Guardián, o  
Estudiante (para jóvenes sin acompañamiento)

\_\_\_\_\_  
Firma de Padre, Guardián, o  
Estudiante (para jóvenes sin acompañamiento)

\_\_\_\_\_  
Fecha

Si el estudiante **NO** vive en un hogar permanente, **no se requieren prueba de domicilio** u otros documentos normalmente requeridos para inscripción y **el estudiante debe ser matriculado inmediatamente**. El enlace del distrito debe ayudar al estudiante conseguir los documentos necesarios, como documentos de inmunización o documentos escolares después de que el estudiante sea matriculado.

**ATENCIÓN ESCUELAS Y DISTRITOS:** Si el estudiante **NO** vive en un hogar permanente, favor de asegurarse que una Formulario de Designación sea completado.

**ELIGIBILITY FOR ENROLLMENT FORM**

*Please print and complete all information*

Student's Full Legal Name: \_\_\_\_\_  
(Last) (First) (Middle)

Nickname: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (Must submit Proof of Age - See attached for acceptable proof)

Street Address: (Actual Resident not PO Box)

\_\_\_\_\_  
(Street number and name)

\_\_\_\_\_, New York Zip Code: \_\_\_\_\_

(\*Must submit Proof of Residency. See attached for acceptable proof)

Mailing Address: (PO Box acceptable)

\_\_\_\_\_  
(Street number and name)

\_\_\_\_\_, New York Zip Code: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_  
(Name) (Name)

Telephone:  
Home: \_\_\_\_\_  
Work: \_\_\_\_\_  
Cell: \_\_\_\_\_

**PROOF OF VERIFICATION OF RESIDENCE PROVIDED:**

- Copy of Deed
- Copy of Purchase Contract, with Letter from Attorney (including date/time of closing)
- Lease Agreement or Statement from Landlord, Owner or Tenant from whom you lease or live with
- Other (see list below): \_\_\_\_\_

**PROOF OF VERIFICATION OF AGE PROVIDED:**

- Birth Certificate
- Baptismal Certificate
- Other (see list below): \_\_\_\_\_

**EVIDENCE OF CUSTODY PROVIDED:**

- Judicial custody orders
- Guardianship papers
- Signed affidavits
- Other: \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Parent, Guardian or Student (for unaccompanied homeless youth)

\_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Authorized District Employee

**Other proofs of Residency:**

- Pay stub;
- Income tax form;
- Utility or other bills;
- Membership documents based upon residency (e.g., library cards);
- Voter registration document(s);
- Official driver's license, learner's permit, or non-driver ID;
- State or other government issued identification;
- Documents issued by federal, state, or local agencies

**Other proofs of Age:**

- Passport;
- Official driver's license;
- State or other government issued identification;
- School photo identification with date of birth;
- Consulate identification card;
- Hospital or health records;
- Military dependent identification card;
- Documents issued by federal, state, or local agencies;
- Court orders or other court-issued documents;

**Enrolled as of:** \_\_\_\_\_ **Date** \_\_\_\_\_ **Time** \_\_\_\_\_

**Signature of School Employee** \_\_\_\_\_

**Signature of Parent/Guardian** \_\_\_\_\_