



South Colonie

C E N T R A L S C H O O L D I S T R I C T

102 Lorelee Drive
Albany, New York 12205
Phone (518) 869-3576 ext 0454
Fax: 1(833) 961-1185

Enrollment Form

Residency Questionnaire

McKinney–Vento Assistance Act

The McKinney–Vento Assistance Act of 1987 is a federal law that provides money for homeless shelter programs.

CONFIDENTIAL INFORMATION

Name of LEA South Colonie Schools

Name of School _____

Name of Student _____

Gender: M F Date of Birth ____/____/____ Grade _____

Address: _____ Phone _____

Where is the student currently living? (Please check one given below.)

- In an emergency or transitional shelter
- With another family or other person due to loss of housing or economic hardship
- With an adult who is not a parent or guardian or alone without an adult
- In a hotel/motel
- In a car, park, bus, train, campsite, public place, abandoned building
- Other temporary living situation (Please describe) _____
- No, the student is residing in permanent housing.**

Print name of Parent, Guardian, or Student

Signature of Parent, Guardian, or Student

Date _____

If the student is not living in permanent housing, proof of residency and other documents normally needed for enrollment are not required and the student is to be immediately enrolled. After the student has been enrolled, the district/school must contact the previous district/school attended to request the student’s educational records, including immunization records, and the enrolling district’s LEA liaison must help the student get any other necessary documents or immunizations.

NOTE TO SCHOOLS/LEAS:

If the student is NOT living in permanent housing, please ensure that a Designation Form is completed.



South Colonie School District Change of Address

102 Lorelee Drive, Albany, NY 12205 (518) 869-3576 ext 0454

***Please Print**

Name of Student(s)

Old Address of student(s)

New Address of student(s)

Phone #: _____

If there has been a change in primary custody explain below -

List any changes in emergency contact below (provide only if new)

Name _____ Phone _____

Name _____ Phone _____

Moving from _____ School to _____ School.

***** Three proofs of the new address need to be provided with this form.**

Parent Signature _____ Date _____

Administrator Signature _____ Date _____