



MORGAN HILL UNIFIED SCHOOL DISTRICT  
 ENROLLMENT CENTER  
 15600 CONCORD CIRCLE, MORGAN HILL, CA 95037  
 PHONE: 408-201-6030 | enrollment@mhusd.org

## STUDENT RESIDENCY QUESTIONNAIRE/AFFIDAVIT

This document is intended to address the McKinney-Vento Act Assistance Act. Your answers will help determine documents necessary to enroll your child quickly.

**1. Do you and your child/children live in a fixed, regular, adequate nighttime residence? Yes\_\_No\_\_**  
 (If you checked "YES", stop here, you must provide a utility bill in your name as proof of residence. If you checked "NO", please complete the remainder of this form.)

**2. Presently, where does the child/children live? Check one box:**

- In a emergency shelter, transitional shelter, or domestic violence shelter
- Temporarily with another family in a house, mobile home or apartment
- Motel, Car, RV or Campground
- With friends or family members (other than parent/guardian)
- Other: \_\_\_\_\_

**3. The child/children lives with:**

- One parent
- Two parents
- A qualified relative
- Friend(s)
- An adult that is not the legal guardian
- Alone with no adult(s)

**Please list the full name of each child below and the corresponding school name:**

Student	Birth Date	School	Grade

Name of Parent/Guardian: \_\_\_\_\_

Address /Current Location: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Emergency Contact \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_  
 Date

**FOR OFFICE USE ONLY: Entered into Aeries\_\_ Initials\_\_ Date\_\_**