

Middle Township Public Schools

ADMINISTRATION BUILDING
216 South Main Street
Cape May Court House, New Jersey 08210-2499
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Dr. Pamela Shute, District Homeless Liaison, Ext. 3109

Student Residency Declaration

Student Name: _____ ; **D.O.B.:** _____

School where registering: -Elementary #1 -Elementary #2 -Middle School -High School

In accordance with the New Jersey state law (N.J.S.A.18A:38-1 AND 18A:7B-12), it is necessary to determine the residence of students entering the school district.

CHECK ONE ONLY: Please check off only A or B that applies to your family's living situation.

A. ___ Permanent Residence: Requires Proof of Residency

(Check only **ONE** box below)

- We live in our own residence and have provided **acceptable Proof of Residency**; none of the transitional or homeless living situations below apply to our family.
- We share a residence on a **permanent basis** with family or friends, and have provided **acceptable Proof of Residency**. (This is often called *doubled-up*)

B. ___ Transitional or Homeless Situation: Cannot Provide Proof of Residency

If you are in a transitional or homeless situation, please indicate one of the following.

Be assured that this information is kept in the strictest of confidence.

You must also complete the McKinney-Vento Form on the back of this form.

Check only ONE below:

- Hotel/motel
- Transitional Housing / Shelter
- Unsheltered / Car
- Campground
- Migrant family dwelling
- Family / friend's home (temporary/transitional)

Parent/Legal Guardian signature: _____ **Phone:** _____

Date: _____

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McKinney-Vento Student Notification

Complete Only if you checked Box B: Transitional or Homeless Situation on the Student Residency Declaration Form

Attention Parent / Legal Guardian: The State of NJ requires us to notify your former school district if you are in a transitional or homeless situation. This does not affect your child's enrollment. However, if you file a fraudulent claim, you will be held liable for the student's tuition. By completing this *Notification*, you are stating that your family is in a transitional or homeless situation, and living at the address you listed below. **You will notify Middle Township School District when you obtain permanent housing.**

Complete One Form for Each Student

Name of Student: _____; D.O.B.: _____; Grade: _____

Date Moved into Middle Township (Homeless Date in PowerSchool): _____

Name of Parent / Legal Guardian: _____

Other Children in the Family: (Include dates of birth): _____

Former Residence and School:

Last Permanent Address: _____

Last District of Permanent Residence: _____

Last School Student Attended: _____

The actions that caused the loss of housing are:

Current Residence:

The family is currently living at the following address:

Street: _____

City: _____

School Selection:

Under the McKinney-Vento law, your child may be able to remain at his/her former school. Please select one of the following:

1. ____ I request to register my child in the Middle Township School District.
2. ____ I prefer that my child returns to our former school district (listed above).

I will notify Middle Township School District when my family obtains permanent housing.

Parent / Legal Guardian Signature: _____

Date of Registration or Signature (do not put into PowerSchool): _____