

RIVERSIDE TOWNSHIP SCHOOL DISTRICT

Student Housing Status Form

(Revised 7/23/13)

In enrolling your child in Riverside Public Schools, it is necessary for us to attain specific information about your family's housing situation. This information helps us to determine the district or state obligated to bear the cost of your child's education.

New Jersey law provides specific criteria that help us determine if a child or youth in preschool through grade 12 is considered "homeless" for the purposes of enrollment.

_____ Child's Name		_____ Date of Birth	_____ Grade
_____ Mother's/Guardian's Name		_____ Father/Guardian's Name	
() _____ Home Phone	() _____ Work Phone	() _____ Home Phone	() _____ Work Phone
_____ Current Address		_____ Current Address	
_____ City, ST ZIP Code		_____ City, ST ZIP Code	

Reason for leaving previous address (please check one):

- Sold home _____ Lease expired _____ Evicted _____
- Other _____

Please state reason: _____

Please check any of the following that apply:

The Student lives in...

- _____ A permanent residence for which the parent/guardian holds a lease or mortgage agreement.
- _____ A permanent residence for which someone other than the parent/guardian holds a lease or mortgage agreement.
- _____ The residence of relatives or friends with whom the student (and/or his family) is temporarily residing out of necessity because the family lacks a regular or permanent residence of its own.
- _____ A shelter designed to provide temporary living accommodations, including hotels, motels, congregate shelters, transitional housing and homes for adolescent mothers.
- _____ A public or private place not designated for or ordinarily used by people for regular sleeping accommodations, such as cars, tents, or temporary shelters for migrant workers.
- _____ Any temporary location where a student is awaiting a foster care placement.

***** If living in a temporary residence for which you do not hold a lease or mortgage, do you pay rent?**

No _____ Yes _____

If yes, how much do you pay? _____; Please check one of the following: Monthly _____ Weekly _____

I, the parent/guardian, understand that the district of residence will make the decision for placement based upon the best interests of the child after consulting with me. If I disagree with the decision, I know that I may appeal to the County Superintendent of Schools. It is my wish that my child:

- _____ Return to his/her previous school
- _____ Attend the school where we are now living
- _____ Other _____

I hereby certify that the information provided on this form is truthful.

Parent's/Guardian's Signature

Date