

Madison School District 321
Special Services
 Providing a World of Opportunity

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In order to maintain accurate records for student residence our district is required to perform a mid-year check for residency information. This questionnaire will give us information concerning any changes to your residency status and will help to determine whether or not additional support and services may be available to our students. If you have questions regarding this form please contact Madison School District Special Services at the phone, e-mail, or address listed above.

Question 1: Has your residency changed since enrollment day for your school in August 20__?

If no, please disregard this questionnaire and discard.

If yes, please continue to Question #2.

Question 2: Where does your student stay at night?

In a home you own or rent.

Temporarily with another family in a house, mobile home or apartment.

Other (please specify): _____

Question 3: The student lives with:

1 parent

A relative, friend(s), or other adult(s)

2 parents

Alone with no adults

1 parent & another adult guardian

An adult that is not the parent or legal guardian

Student Name		School	
Guardian Names(s)		Student D.O.B.	Grade
New Address		Phone	
E-mail address			

Signature of Parent/Legal Guardian _____ Date _____

Please return this form to your child's teacher or the school office.