Northwestern Community Unit School District #2

Unit Office: (217) 436-2210 Elementary: (217) 436-2442

Patrick Bowman, Superintendent pbowman@northwestern.k12.il.us
Matthew Phillips, Bookkeeper mphillips@northwestern.k12.il.us

Date:

30510 Route 111 Palmyra, Illinois 62674



Gayle Releford, Secretary greleford@northwestern.k12.il.us

Jr./Sr. High: (217) 436-2011

Fax: (217) 436-2701

STUDENT NIGHTTIME RESIDENCY QUESTIONNAIRE

PLEASE FILL OUT THE FOLLOWING FORM TO THE BEST OF YOUR ABILITY.

	LAST	FIRST	MIDDLE
Address:		AG.	.48
Gender: Male or I	Female Date of Birth: _		Grade:
Phone Number: _			
WHERE IS THE	ESTUDENT CURRENTL'	Y LIVING?	
			PEERON DUE TO LOSS OF
HO IN A HO IN A CAR	NOTHER FAMILY MEM OUSING AS A RESULT C FEL/MOTEL R, PARK, BUS, TRAIN OF FEMPORARY LIVING SI	F ECONOMIC HAR R CAMPSITE	DSHIP (DOUBLED UP)
IN A HO IN A CAR OTHER T	OUSING AS A RESULT C TEL/MOTEL R, PARK, BUS, TRAIN OF TEMPORARY LIVING SI IANENT HOUSING	OF ECONOMIC HAR R CAMPSITE TUATION PLEASE F	DSHIP (DOUBLED UP)

***PLEASE NOT THAT THE INFORMATION PROVIDED MAY BE USED TO HELP OFFICIALS IN DETERMINING SERVICES THAT YOUR STUDENT MAY BE ABLE TO RECEIVE UNDER THE MCKINNEY-VENTO ACT. FOR MORE INFORMATION PLEASE CONTACT SARAH CRAWFORD, SCHOOL NURSE AND LIAISON 217-436-2442 EXT. 1205.