

Student Insurance and Residency Questionnaire

Please complete and sign both parts

PART I

Re: Student Injuries and Insurance, 2018-2019 School Year

The safety of our students is one of our most important concerns. Even so, accidents happen and resulting medical treatment (ambulance transport, surgery, hospitalization, etc.) can be very expensive. Please know that the District does not assume responsibility for these costs. However, as a service to you and your child, your school offers access to a low cost, voluntary purchase student accident/health insurance program. The program is arranged and administered by Myers-Stevens & Toohey & Co., Inc. a firm that has specialized in such coverages for 40 years. **To enroll, please mark the appropriate box below and return this form to the school. Further instructions for enrollment will be provided to you.** If you have any questions, please call Myers-Stevens & Toohey at (800) 827-4695. Bilingual representatives are available for parents who need assistance in Spanish. **In order to document your having been notified of this matter, please sign and complete the bottom of this form and immediately send it back to the school with your child.**

As parent/guardian of (please list student name(s) here) _____,
I understand that the School does not assume responsibility for student injuries but does make voluntary purchase, student accident insurance available. I have received the information on this program.

I will enroll my child in the program I choose NOT to enroll my child in the program

Signed _____ Date _____

PART II

Re: Residency and the McKinney-Vento Act

This form is intended to address requirements of the McKinney-Vento Act, Title X, Part C of the No Child Left Behind Act. Your answers questions will help staff with school enrollment and may enable the student to receive additional services.

Student Name	Sex	Birthdate	Age
	<input type="checkbox"/> Male or <input type="checkbox"/> Female		
	<input type="checkbox"/> Male or <input type="checkbox"/> Female		
	<input type="checkbox"/> Male or <input type="checkbox"/> Female		
	<input type="checkbox"/> Male or <input type="checkbox"/> Female		
	<input type="checkbox"/> Male or <input type="checkbox"/> Female		

1. Is your current residence a temporary living arrangement? Yes No
2. Is your living arrangement due to loss of housing or economic hardship? Yes No
3. Is your current resident inadequate for meeting physical and psychological needs? Yes No

If you answered YES to any of these questions, where does the student stay at night? (Please check one box.)

- In a motel/hotel
- In a shelter
- With more than one family in a house, mobile home or apartment (doubled-up)
- In a car, park, campsite or location not usually used for sleeping accommodations (unsheltered)

I declare under penalty of perjury under the laws of the State of Washington that the information provided here is true and correct.

Parent/Guardian Signature: _____

Date: _____

OR Unaccompanied Youth Signature: _____

Date: _____

The Wilson Creek School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The Civil Rights Compliance Coordinator is available to handle questions and complaints of alleged discrimination. If you have questions and/or concerns please call Sally Nelson (Civil Rights Compliance Coordinator) snelson@wilsoncreek.org or Laura Christian (504/ADA Coordinator) lchristian@wilsoncreek.org or Kirk Freeman (Title IX) kfreeman@wilsoncreek.org at Wilson Creek School District PO Box 46, Wilson Creek, WA 98860, phone 509-345-2541.

El Distrito Escolar de Wilson Creek no discrimina en sus programas o actividades por motivos de sexo, raza, credo, religión, color, origen nacional, edad, condición de veterano de guerra o grado militar, orientación sexual, expresión de género o identidad, discapacidad o uso de perro guía entrenado o animal de servicio, y ofrece igualdad de acceso a los Boy Scouts y a otros grupos de jóvenes especificados. El empleado mencionado a continuación ha sido designado para atender consultas y quejas de supuesta discriminación: Sally Nelson, La directora, snelson@wilsoncreek.org o Laura Christian lchristian@wilsoncreek.org o Kirk Freeman kfreeman@wilsoncreek.org Wilson Creek School District PO Box 46, Wilson Creek, WA 98860, telephono 509-345-2541.