FERNDALE SCHOOL DISTRICT

PO BOX 698, Ferndale WA 98248

Student Housing Questionnaire

Name of Student: _____
First Middle Last

Name of School: _____ Grade: _____ Birthdate: _____ Age: _____

The answers to the following questions can help determine the services the student may be eligible to receive under the McKinney-Vento Act 42 U.S.C. 11435. The McKinney-Vento Act provides services and supports for children and youth experiencing homelessness.

1—Do you rent/own your home/apartment/etc? ☐ Yes (Do NOT complete form) ☐ No, please answer #2

2—If you do NOT rent/own your home/apartment/etc, is it due to a loss of housing or economic hardship?

☐ No (Do NOT complete remainder of form)

☐ Yes (Please complete remainder of form)

Where is the student currently living? *Complete this section ONLY if your answer to Question #2 was Yes:*

☐ In a motel
☐ In a shelter
☐ Moving from place to place/couch surfing
☐ With another family
☐ In a residence with inadequate facilities (no water, heat, electricity, etc.)
☐ A car, park, campsite, or similar location
☐ Transitional Housing
☐ Other _____

ADDRESS OF CURRENT RESIDENCE: _____

PHONE NUMBER: _____ EMAIL: _____

☐ Unaccompanied (not living with parent or legal guardian) ☐ Living with parent or legal guardian

PRINT NAME of parent(s)/legal guardian(s)/unaccompanied youth: _____

* Signature of parent/legal guardian: _____ Date: _____

- OR – * Signature of unaccompanied youth: _____ Date: _____

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

District Liaison: Kim Bunch, Student Services, 360/383-9432, kim.bunch@ferndalesd.org

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For School Personnel Only: Forward completed questionnaire to building FCC (elementary) or District Liaison (MS/HS)

☐ (N) Not Homeless ☐ (A) Shelters ☐ (B) Doubled-Up ☐ (C) Unsheltered ☐ (D) Hotels/Motels