

FAMILIES IN TRANSITION HOUSING QUESTIONNAIRE



**Social Emotional Learning and Equity
Families in Transition**

FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT

HOUSING QUESTIONNAIRE FORM

The information provided below will help Folsom Cordova Unified School District determine what services you and/or your student may be able to receive. This can include additional educational services through Title I, Part A and/or the federal McKinney-Vento Assistance Act. The information provided on this form will be kept confidential and only shared with appropriate school district and site staff.

Parent/Guardian: _____ Email: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Text: YES NO

I am a student under the age of 18 and living apart from parents or guardians? YES NO

Is this address PERMANENT or TEMPORARY?

Presently, are you and/or your family living in any of the following situations? Check all that apply.

<input type="checkbox"/>	Staying in a shelter (family shelter, domestic violence shelter, youth shelter, or FEMA trailer).
<input type="checkbox"/>	Temporarily living in a hotel/motel due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason.
<input type="checkbox"/>	Sharing housing with others due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason.
<input type="checkbox"/>	Living in a car, park, campground, abandoned building, or inadequate accommodation (ex. lack of water/heat/electricity).
<input type="checkbox"/>	Sharing housing with others NOT due to economic hardship. You are in a long-term, cooperative living arrangement between families in a permanent, fixed, regular, and adequate residence.
<input type="checkbox"/>	Living in a single-family residence that is permanent, fixed, regular, & adequate (ex. house, apartment, duplex, condo). You own your home or have a rental agreement.

List all your children living with you, including the infants and toddlers. Indicate ID # of FCUSD students, if known.

Student ID	Name	DOB	Gender	School	Grade
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HOUSING AND EDUCATION RIGHTS

- Immediate enrollment in the school they last attended (school of origin) or the local school where you are currently staying, even if you do not have all the documents normally required at the time of enrollment.
- Continue to attend the school of origin, if requested by you, and in the best interest of the student's education.
- Receive transportation to and from their school of origin, the same special programs, and services, if needed, as provided to all other children, including free meals and Title I.
- Receive the full protections and services provided under all federal and state laws, as it relates to homeless children, youth, and their families.

The undersigned parent/guardian or student (if unaccompanied) attests to the accuracy of the information provided above.

Parent/Guardian/Student Signature: _____ Phone: _____ Date: _____

McKinney-Vento Eligible: YES NO

Date: _____

Education Services Student Liaison: LYNN LAVAPIE

Phone: (916)924-9090 ext.610344

Email: llavapie@fcusd.org

FAMILIES IN TRANSITION (916)294-9090 opt.4
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