



The information requested on this form is required to determine eligibility for services provided per the McKinney-Vento Homeless Assistance Act (42 U.S.C. Chapter 119, Subchapter IV, Part B), which ensures the educational rights and protections for youth experiencing homelessness (as defined by USC 1143a [2]).

*If you own or rent your own home, you do not need to complete this form

Parent/Guardian/Caregiver Information

Name: _____ I am the parent/legal guardian/caretaker (circle one)

Phone Number: _____ Email Address: _____

Student Information

Please list **ALL** students in the family (including Preschool and Pre-K students)

Student Name	Student ID#	Grade	School

Previous Living Situation

Previous Address: _____ How long did you live there? _____

Did you rent/own/lease this address: Yes or No (please circle) Was this move planned or unexpected? (Please circle)

Why did you leave that address? _____

Current Living Situation

Which of the following best describes the student(s) temporary living situation (check one):

- ☐ Staying "doubled up" in the home of a friend or relative (due to economic hardship or loss of housing)
- ☐ Staying in a motel/hotel
- ☐ Staying in an unsheltered location (ex: without running water/electricity, tent, vehicle, campground, park, etc.)
- ☐ Staying in a shelter (family shelter, domestic violence shelter, etc.)
- ☐ Staying in transitional housing (housing available for a specific period of time as a part of a program and is partially paid for by a church, a non-profit organization, or a government agency or other organization)

Address where you are currently living: _____

Mailing Address (if different than place currently living): _____

How long has/have the student(s) lived in the living arrangement? _____

How long do you plan to live in this arrangement? _____

How many bedrooms/bathrooms are there at this residence? _____

How many people are living at this residence? _____

Are you on the lease at the current address? Yes or no _____

Are you paying rent/a fee to live here? Yes or no _____ Could you be asked to leave this residence on short notice? Yes or no _____

Where would you go if you were asked to leave on short notice? _____

What else are you currently paying for? _____

Are you currently able to get your student(s) to and from school? Yes or no _____

If not, what barriers are preventing you from transporting your student(s)? _____

Contributing Factors

Which of the following applies to the cause of your present living situation (mark all that apply):

- ☐ Economic hardship
 - ☐ Loss of job/decrease in income DUE TO THE COVID PANDEMIC that resulted in loss of housing
 - ☐ Loss of job/decrease in income NOT due to the COVID pandemic that resulted in loss of housing
- ☐ Eviction/foreclosure
- ☐ Household factors
- ☐ Natural disaster (ex: tornado, storm, flood, hurricane, fire, etc.)
- ☐ Living conditions (ex: lack of water/heat/electricity, no windows, overcrowding, etc.)
- ☐ If none of the above apply, please describe the cause of your TEMPORARY living situation: _____

McKinney-Vento Services

If eligible, services that may be provided include free meals at school, school supplies, waived educational fees, transportation (with some eligibility restrictions) to/from the school of origin for the duration of the school year.

Verification of Information

****If you are an unaccompanied minor, please fill out this section with your own printed name and signature**

- ☐ Check to confirm statement: I declare that this information provided here is true and correct and of my own personal knowledge

Printed Name Signature Date

****If this form was completed by someone else (community liaison, counselor, etc.) please fill out this section**

- ☐ Check to confirm statement: I declare that this information provided here is true and correct and of my own personal knowledge

Printed Name Signature Date

Relationship to student: _____

McKinney-Vento Office Use Only

Date Received: _____ Signature: _____

Eligible: yes _____ no _____ PowerSchool updated: yes _____ no _____ FRL notified: yes _____ no _____ Transportation: _____