Tustin Unified School District
Housing Questionnaire (HQ)

Attention TUSD Families and Students

The McKinney-Vento Homeless Assistance Act ensures that students experiencing housing instability have equal access to education and the support services they need to achieve the same high academic standards as all students. Please, complete the Student Housing Questionnaire any time your housing situation changes. This form helps us better understand your circumstances and connect you with appropriate support services for your child and family. The McKinney-Vento Act also requires schools to remove barriers to enrollment, attendance, and academic success, while ensuring educational stability for students experiencing homelessness or housing instability. If you have any questions or need assistance, please contact your district's McKinney-Vento Liaison: Student Services, (714)730-7301 ext. 51424

Student Information

First Name:	Last Name:
Date of Birth:	Gender:
School:	Grade:
Student Address:	
Parent/Guardian Full Name:	Parent Phone:
Parent Email:	Preferred Contact Method: ☐ Phone Call ☐ Text Message ☐ Email

Current Living Situation

Please select the option(s) that best describes where you or your child(ren) are currently staying.

- ☐ In a motel or hotel due to financial hardship
- ☐ In a car, park, campground, or public place (Unsheltered)
- ☐ Living with more than one family in a house or apartment due to financial hardship (Doubled Up")
- ☐ In a place without running water, heat, or electricity, or otherwise not fit for human habitation (e.g. garage, shed, tent, storage unit, abandoned building)
- ☐ In a shelter, group home, or transitional housing

  Shelter Name: _____
- ☐ Moving from place to place (Couch-surfing)
- ☐ Living alone as a minor student without an adult (Unaccompanied Youth)
- ☐ Other: _____

Family Information

Please list all the child(ren) and youth currently in your household

Full Name	Date of Birth	School	Grade

Does the child or do the children need any services or referrals to additional resources?

_____

_____

Affidavit: By signing this form, I declare under penalty of laws in the State of California that the foregoing is true and correct. In addition, I understand that the school district reserves the right to verify the above listed residence information.

Print Parent/Guardian or Youth Name: _____

Signature: _____ Date: _____

If you have any questions or need assistance, please contact your district's McKinney-Vento Liaison: Student Services, (714)730-7301 ext. 51424