Student Housing Questionnaire

DISTRICT Data Entry:
Date:

This questionnaire is intended to address the requirements of Every Student Succeeds Act: Title IX/Part A. The answers to questions below will assist us in determining if your student may qualify for additional educational support services. **PLEASE PRINT VERY CLEARLY, COMPLETE ONE FORM PER FAMILY, and return the questionnaire to your school's main office. ¿Habla Ud. Español? Por favor doble este papel al otro lado para llenar este estudio.**

1. How many other children/youths are in your household (even if not enrolled in school)? _____

2. Names of Students Enrolled in School (PK–grade 12) or not enrolled in school, including those ages 1-4 (If needed, use an additional sheet of paper.)

a. Name of Student to be Enrolled:

First Name	MI	Last Name	Birth Date	Grade	School

b. Other Children/Youth in Your Household (even if not enrolled in school):

First Name	MI	Last Name	Birth Date	Grade	School

3. Parent's, Guardian's, or Unaccompanied Youth's Name (Print): _____

a. Street Address (Location of House): _____

b. Length of time at this Address: _____

c. Former Address: _____

d. Mailing Address: _____

e. Telephone: _____ Cell Phone: _____ Work phone: _____

The undersigned certifies that the information provided is accurate.

Parent's, Guardian's, or Unaccompanied Youth's Signature: _____ Date: _____

4. Place an "X" in the appropriate box to answer "Yes" or "No".

NIGHTTIME RESIDENCE	YES	NO	CODE
1. My family lives in an emergency or transitional shelter (e.g., FEMA Trailer).			A
2. My family shares the housing of other persons due to loss of housing, economic hardship, or a similar reason; doubled-up.			B
3. My family lives in a car, park, temporary trailer park or campground due to lack of alternative adequate accommodations, public space, abandoned building, substandard housing, bus or train station, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings or similar settings.			D
4. My family lives in a hotel or motel due to lack of alternative adequate accommodations.			E
5. A child/youth in my home is under the age of 16 and unaccompanied (not in the physical custody of a parent or guardian) or I am an unaccompanied youth under the age of 16 years.			
6. A child/youth in my home is 16 years of age or older and an unaccompanied youth (youth not in the physical custody of a parent or guardian) or I am an unaccompanied youth 16 years of age or older.			

5. If you marked "Yes" to any questions above, please indicate the cause by placing an "X" in the appropriate box.

☐ Man-made Disaster (Major) (D) ☐ Earthquake (E) ☐ Flooding (F)
☐ Hurricane (H) ☐ Mortgage Foreclosure (M) ☐ Other Homelessness Causes (N)
☐ Pandemic (Major) (P) ☐ Tropical Storm (S) ☐ Tornado (T)
☐ Unknown (U) ☐ Wildfire (W)

Directions for school staff: For students with positive responses to questions 1-6, make a copy of the form for your records, and then return surveys with any positive responses to: McKinney-Vento Liaison to Laurén Morgan, District Office Homeless Liaison..