McKinney-Vento Student Housing Questionnaire

Student Information:

Student Name: _____ _____
First Name *Last Name*

Date of Birth: _____ Grade: _____

Last School Attended: _____

USD 261 School of Attendance: _____

Parent/Guardian Name: _____ _____
First Name *Last Name*

Parent/Guardian Phone Number: _____

Current Living Situation:

Where is the student currently living? (Check one)

- ☐ In my own home or apartment.
- ☐ Sharing housing with another family or friends, due to loss of housing, economic hardship, or a similar reason ("doubled up").
- ☐ In a motel or hotel due to lack of other adequate housing.
- ☐ In an emergency or transitional shelter. Name of Shelter: _____
- ☐ In a campground or trailer park because there is no adequate permanent housing available.
- ☐ In a vehicle, park, abandoned building, bus/train station, storage unit, or another place not designed for people to live.

☐ Temporarily staying in another location. Please Explain: _____

_____

☐ Other (describe): _____

Housing Information:

1. What is your current address?

_____ _____ _____ _____
Address *City* *State* *Zip Code*

2. Is this living arrangement temporary?

   ☐ Yes
   ☐ No

3. Why is the family/student living in this situation?
   ☐ Loss of housing
   ☐ Economic hardship
   ☐ Eviction or foreclosure
   ☐ Domestic violence
   ☐ Natural disaster
   ☐ Family conflict
   ☐ Other: _____

3. How long have you been living in this arrangement? _____

4. Is there another permanent housing option available at this time?

   ☐ Yes
   ☐ No

5. Does the student live with:
   ☐ Parent(s)/Guardian(s)
   ☐ Relative(s)
   ☐ Friend(s)
   ☐ Alone (Unaccompanied Youth)
   ☐ Other (describe): _____

   _____

Additional Information (Optional):

Please provide any additional information that may help us understand your current housing situation:

_____

_____

Parent/Guardian or Student Signature:

I certify that the information provided above is accurate to the best of my knowledge. I understand this information is confidential and is used only to determine eligibility for educational services.

Printed Name: _____

Signature: _____ Date: _____

School Use Only:

Reviewed By: _____

Title: _____ Date Reviewed: _____

Eligibility Determination:

- ☐ Eligible for McKinney-Vento Services
- ☐ Not Eligible
- ☐ Additional Information Needed

Basis for Determination:

_____

_____

McKinney Vento Liaison Printed Name: _____

Signature: _____ Date: _____

Important Note: *Completing this questionnaire does* ***not*** *automatically qualify a student for McKinney-Vento services. The district's McKinney-Vento Liaison must determine eligibility based on the federal definition of homelessness, which includes lacking a* ***fixed, regular, and adequate nighttime residence****.*