STUDENT HOUSING QUESTIONNAIRE
FOR MCKINNEY-VENTO ELIGIBILITY

This form must be completed for all students before the registration form is done

Name of Student: ____________________________ ____________________________ ____________________________
First Middle Last  Student #: ____________________________

Name of School: ____________________________________________________________

Gender: [ ] Male  [ ] Female  Grade: ________  Birth Date: ________ / ________ / ________  Age: ________
MM DD YY

Other children living in the home:
Name: ____________________________  School: ____________________________
Name: ____________________________  School: ____________________________
Name: ____________________________  School: ____________________________

The answers to the following questions can help determine the services this student may be eligible to receive under the McKinney-Vento Act 42 U.S.C. 11435.

1. Is this student’s home a Temporary Living arrangement other than a rental? [ ] YES  [ ] NO
2. Is this a temporary living arrangement due to a loss of housing or economic hardship? [ ] YES  [ ] NO
3. As a student, are you living with someone other than your parent or legal guardian? [ ] YES  [ ] NO

If you answered YES to any of the above questions, please complete the remainder of this form.
If you answered NO to all of the above questions, you may stop here.

Where is the student currently living? (Please check one)
[ ] 1. With more than one family in a house or apartment
[ ] 2. In a motel
[ ] 3. In a shelter or Transitional Housing (through community agency)
[ ] 4. In a location not designed for sleeping accommodations such as a car, park, or campsite
[ ] 5. Living in a place without adequate facilities (no heat, electricity, water, etc.)

Address of current residence, or name of motel/shelter, or “general area” of current residence:
________________________________________________________________________________________
________________________________________________________________________________________

Phone number or contact number: ____________________________ Name of Contact: ____________________________

Print Name of parent(s)/legal guardian(s): ____________________________
(Or unaccompanied youth)
Signature of parent/legal guardian: ____________________________ Date: ____________________________
(Or unaccompanied youth)

Presenting a false record or falsifying records in as offense under Section 73.10, Penal Code, and enrollment of a child under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.003(3)(d).

For School Staff Only: Forward questionnaire to Educational Liaison Connie Crosby in Student Advocacy and Access Department  Office Phone: (801) 826-5396