**McKinney-Vento HousinG Information Form**

Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ D.O.B. \_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Is this address Temporary or Permanent? (circle one)

Please choose which of the following situations the student currently resides in (you can choose more than one):

\_\_\_\_\_ House or apartment with parent or guardian

\_\_\_\_\_ Motel, car, or campsite

\_\_\_\_\_ Shelter or other temporary housing

\_\_\_\_\_ With friends or family members (other than or in addition to parent/guardian)

What was your primary cause of housing instability (1)? Was there a secondary cause (2)? Please mark primary with (1) and secondary with (2, if applicable):

\_\_\_\_ Eviction/Foreclosure/Cannot afford housing

\_\_\_\_ Household/Domestic Factors

\_\_\_\_ Loss or decrease in income/Loss of job

\_\_\_\_ Natural Disaster

\_\_\_\_ Pandemic

\_\_\_\_ None of the above

Are you a student under the age of 18 and living apart from your parents or guardians? Yes No

**Housing and Educational Rights**

Students without fixed, regular, and adequate nighttime residences have the following rights:

1. Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all the documents normally required at the time of enrollment without fear of being separated or treated differently due to their housing situations;
2. Transportation to the school of origin for the regular school day;
3. Access to free meals, Title I and other educational programs, and transportation to extra-curricular activities to the same extent that it is offered to other students.

Any questions about these rights can be directed to the local McKinney-Vento liaison at [Insert phone number] or the State Coordinator at [Insert phone number].

By signing below, I acknowledge that I have received and understand the above rights.

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*Signature of Parent/Guardian/Unattached Youth Date*

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*Signature of McKinney-Vento Liaison Date*