

McKinney-Vento Eligibility Questionnaire

This questionnaire is intended to address the McKinney-Vento Act 42 U.S.C. 11435. The answers to these questions will help determine eligibility and services a student may be eligible to receive. All information is confidential.

	Yes	No
Is your current address a <i>temporary</i> living arrangement?		
If temporary, is this living arrangement due to loss of housing or economic hardship?		

If you answered YES to BOTH of the questions above, please complete the remainder of the form. If you answered NO to EITHER of the questions above, you may STOP here. Thank you.

Name of Student:	Date of Birth: de: School most recently attended:		
Age: Gender: Grade:	School most recently attended:		
Name of Parent(s)/Legal Guardian(s): Temporary/Physical Address: City: Length of time at address:	Zip Code:		
Where is the student currently living?			
 In a motel Moving from place to place In a place not designed for ordinary sleeping accor In a shelter (e.g., Primavera Foundation Shelter for Other children in the family: 	nmodations such as a car, park, camps	site, or the forest	
Name	School	Grade	
The undersigned Parent/Legal Guardian certifies that the situations may affect enrollment.	he information provided is correct. Fa	alse claims about living	

Parent/Legal Guardian Signature: _____ Date: _____

For Office Staff:

Do not make copies of this form. If an option is checked, please inter-district mail the completed form to the Homeless Education Liaison at the Special Services Department. Per McKinney-Vento guidelines, a copy should NOT be placed in the student's cumulative file. Please shred any forms that have a NO mark in either of the first two questions.

Enrolling School & Staff Name: