

virginiab@sutter.k12.ca.us

STUDENT HOUSING QUESTIONNAIRE

Student's Name:		Date of Birth:				
Sch	nool:	Grade	:	Gender	:	
thei pub	ools are required to identify homeless childred from the families with information, resources, and solic education as is provided to other children nelessness are provided the rights and servuide: Immediate enrollment in the school of reside of enrollment is missing. Continued attendance in the school of origing transportation to and from the school of origing the services as those offered to other study.	support necessary to end and youth. Specificallices to which they are lence or the school of our upon request and is digin upon request.	sure that they by, it is to ensure entitled to underigin even if the etermined to be	have equal ace that childred der the McKl	ccess to the same free, appropriate in and youth who are experiencing inney-Vento Act. These rights may ion normally required at the time	
•	Full protections and services provided under all federal and state laws, as it relates to homeless children, youth, and their families. McKinney-Vento Act 42 U.S.C. 11435 SEC. 725. DEFINITIONS					
	e information provided on this form are responsible for providing services to the stude	•	ential and wil	I only be s	hared with school personnel	
1.	(UNACCOMPANIED MINOR) The student is under the age of 18 and living apart from parent/guardian(s): \Box Yes \Box No					
2.	The student and/or the student's family is: (Check all that apply)					
	☐ Living in a single-home residence that is permanent					
	☐ Sharing housing with others due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason					
	☐ Temporarily living in a motel or hotel due to loss of housing, economic hardship, natural disaster, or similar reason					
	□ Staying in a shelter (family, domestic violence, or youth shelter) or FEMA trailer					
	☐ Living in a car, park, campground, abandoned	□ Living in a car, park, campground, abandoned building, or other inadequate accommodations (i.e., lack of water, electricity, or heat)				
	□ Other:					
3.	Other children currently living with the student:					
	Name	Relationship	Birthdate	Grade	School (if applicable)	
By (formation provided	l ahove is cor	rect and a	Curate	
•		normation provided	1 400 0 13 001		curate.	
Signature:			Date:			
Pri	nt Name:	Relat	ionship to the	e Student:		
Pho	one Number:					
Phy	sical Address:					
Ma	iling Address (if different):					
Virg	r local County Homeless Liaison is ginia Burns 1-822-2969					