

McKinney-Vento Questionnaire Form

Student Name: _____

Date of Birth: _____

School Name: _____

Grade: _____

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. The McKinney-Vento Act provides services and supports for children and youth experiencing homelessness. The information you provide is confidential. If eligible, students are to be *immediately enrolled* in accordance with The McKinney-Vento Assistance Act.

If you own/rent your own home, you do not need to complete this form.

Do you/your student live in any of these following situations?

- In a motel
- In a shelter, or transitional housing program
- Moving from place to place/couch surfing
- Sharing the housing of others due to a loss of housing, economic hardship, or similar reason
- In a car, park, campsite, abandoned building, bus/train station or similar location
- In a residence with inadequate facilities (no water, no heat, no electricity, etc.)

The undersigned certifies that the information provided here is true and correct under penalty of perjury under the laws of the State of Washington:

Print name of person completing form: _____

Phone number or message number: _____

Address of current residence: _____

Student is living with a legal parent/guardian OR not living with a legal parent/guardian

Signature: _____

Date: _____

For more information please contact the HEART program office at 354-7302.

Enrollment staff: Please forward questionnaire to the HEART program at the Administration Building.