

# Student Housing Questionnaire



This questionnaire is intended to address the requirements of Every Student Succeeds Act: Title IX/Part A. The answers to questions below will assist us in determining if the student(s) may qualify for additional educational support services (including immediate enrollment, school stability, backpack, supplies, uniforms, etc.). If you rent or own your home, sign below and submit form to school. **¿Habla Ud. Español? Por favor pida este papel en español para llenar este estudio.**

1. How many children/youths are in your household (even if not enrolled in school)? \_\_\_\_\_

2. Name of Student(s) Enrolled in School (PK–grade 12) and not enrolled in school, including those ages 1-4 (If needed, use an additional sheet of paper.)

First Name	MI	Last Name	Birth Date	Grade	School & ID Number
First Name	MI	Last Name	Birth Date	Grade	School & ID Number
First Name	MI	Last Name	Birth Date	Grade	School & ID Number
First Name	MI	Last Name	Birth Date	Grade	School & ID Number
First Name	MI	Last Name	Birth Date	Grade	School & ID Number

3. Parent's, Guardian's, or Unaccompanied Youth's Name (Print): \_\_\_\_\_

- a. Street Address (Location of House): \_\_\_\_\_
- b. Length of time at this Address: \_\_\_\_\_
- c. Former Address: \_\_\_\_\_
- d. Mailing Address: \_\_\_\_\_
- e. Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**The undersigned certifies that the information provided is accurate.**

**Parent's, Guardian's, or Unaccompanied Youth's Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

4. Place an "X" in the appropriate box to answer "Yes" or "No".

NIGHTTIME RESIDENCE	YES	NO	CODE
1. My family lives in an emergency or transitional shelter (e.g., FEMA Trailer).			A
2. My family shares the housing of other persons due to loss of housing, economic hardship, or a similar reason; doubled-up.			B
3. My family lives in a car, park, temporary trailer park or campground due to lack of alternative adequate accommodations, public space, abandoned building, substandard housing, bus or train station, public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings or similar settings.			D
4. My family lives in a hotel or motel due to lack of alternative adequate accommodations.			E
5. A child/youth in my home is under the age of 16 and unaccompanied (not in the physical custody of a parent or guardian) or I am an unaccompanied youth under the age of 16 years.			
6. A child/youth in my home is 16 years of age or older and an unaccompanied youth (youth not in the physical custody of a parent or guardian) or I am an unaccompanied youth 16 years of age or older.			

5. If you marked "Yes" to any questions above, please indicate the cause by placing an "X" in the appropriate box.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Man-made Disaster (Major) (D) | <input type="checkbox"/> Earthquake (E)           | <input type="checkbox"/> Flooding (F)                  |
| <input type="checkbox"/> Hurricane (H)                 | <input type="checkbox"/> Mortgage Foreclosure (M) | <input type="checkbox"/> Other Homelessness Causes (N) |
| <input type="checkbox"/> Pandemic (Major) (P)          | <input type="checkbox"/> Tropical Storm (S)       | <input type="checkbox"/> Reason _____                  |
| <input type="checkbox"/> Unknown (U)                   | <input type="checkbox"/> Wildfire (W)             | <input type="checkbox"/> Tornado (T)                   |

**If you answered "Yes" to some or all of the questions above, an educational representative may contact you to verify if qualifications are met for additional educational services.**

**Directions for school staff: For students with positive responses to questions 1-5, make a copy of the form for your records, and then return surveys to: Students & Families in Transition Staff via email.**