

Marion County School District



Housing Questionnaire – McKinney-Vento

School \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Name (Please Print): \_\_\_\_\_

Please list of the school aged children that you are responsible for and who currently live with you including preschool children and any who have not graduated high school or obtained a High School Equivalency degree (Please Print):

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ School: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ School: \_\_\_\_\_

**Information provided on this form is confidential.**

**1. Do you live in any of the following situations?**

\_\_\_\_ Sharing the housing of other persons due to: (check one)

\_\_\_\_ Loss of housing, economic hardship or similar reason (example: evicted from home, etc.)

Explain: \_\_\_\_\_

\_\_\_\_ Long-term, cooperative living arrangement to save money or a similar reason

\_\_\_\_ Other (please specific): \_\_\_\_\_

\_\_\_\_ In a motel, hotel, campground or similar setting due to: (check one)

\_\_\_\_ Lack of alternative adequate accommodations, explain: \_\_\_\_\_

\_\_\_\_ A convenient living arrangement or waiting for apartment or house to be ready

\_\_\_\_ Other (please specify): \_\_\_\_\_

\_\_\_\_ In emergency or transitional shelters such as domestic violence or homeless shelters or transitional housing or other shelter or agency

\_\_\_\_ Have a primary nighttime residency that is a place not designed for or ordinarily used as a regular sleeping accommodation for humans

\_\_\_\_ In cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations or similar settings.

\_\_\_\_ None of the above / Unaccompanied youth

**2. How long do you anticipate living at this location?** \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian/Unaccompanied Youth Signature

\_\_\_\_\_  
Date