

North Monterey County Unified School District 2021-2022
STUDENT HOUSING QUESTIONNAIRE/AFFIDAVIT/REFERRAL

This residency questionnaire is used to determine if students and families are eligible to receive additional services under the McKinney Vento Homeless Education Assistance Act. Your response is confidential.

Student (legal name): _____ School: _____

Home room teacher: _____ Room #: _____ Grade: _____

Birthdate: _____ Gender: Male Female

Please list all other siblings enrolled in North Monterey County Unified School District including children ages 0-5 in your household.

Name: _____ Date of Birth: _____ Grade: _____ School: _____

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Name: _____ Date of Birth: _____ Grade: _____ School: _____

Name: _____ Date of Birth: _____ Grade: _____ School: _____

We are now living:

- with other families or individuals due to financial hardship or loss of housing in a house, apartment, or mobile home ***(that I do not own)***. (120)
- a motel/hotel (110)
- a shelter (family, domestic violence or transitional living program) (100)
- a car, RV, campsite, trailer park, mobile home or garage (130)
- with no other families or individuals in a house, apartment, or condominium/townhouse
- foster youth living in a family home (210)
- foster youth awaiting placement into foster family home (220)
- Other: _____ (300)

We can use support in the following: ***(Items may not always be available)***

- School Supplies Food
- Backpack Clothing
- Information and Referral to Housing Resources Parent Education Workshops
- Information and Referral to Health Services other _____

I declare under penalty of perjury under the California state law that the information provided here is true and correct to the best of my knowledge.

Print your name (first and last): _____ Date: _____

Signature of parent/guardian/caregiver/adult: _____

Residence: _____ City: _____ Zip: _____

Telephone: _____ (Home) _____ (Cell) Email: _____ (Optional)

FOR DISTRICT LIAISON USE ONLY:

- Student is covered by the McKinney Vento Act. Student is not covered by the McKinney Vento Act. Follow-up required.

Signature of individual entering information into database: _____ Date identified: _____