



Valley School District No. 070

3030 Huffman Road • Valley, WA 99181 • Ph: (509) 937-2791 • Fax: (509) 937-2691 • www.valleysd.org

Student Housing Questionnaire

For distribution to all families/students annually. For more information or guidance, please contact the District Homeless Education Liaison, Natalee Reid, at (509)937-2696 or Natalee.Reid@valleysd.org.

School Name _____

Student Name _____

First

Middle

Last

Birth Date ____/____/____ Age ____ Female Male
Mo Day Year

This form is intended to address requirements of the McKinney-Vento Act, Title X, Part C of the No Child Left Behind Act. Your answers to these questions will help staff with school enrollment and may enable the student to receive additional services.

- 1. Is your current residence a temporary living arrangement? Yes No
- 2. Is your living arrangement due to loss of housing or economic hardship? Yes No
- 3. Is your current residence inadequate for meeting physical and psychological needs? Yes No

**If you answered YES to any of the questions, please complete the remainder of this form.
If you answered NO to all of the questions, you may stop here.**

Where does the student stay at night? (Please check one box.)

- In a motel/hotel
- In a shelter
- With more than one family in a house, mobile home, or apartment (doubled-up)
- In a car, park, campsite, or location not usually used for sleeping accommodations (unsheltered)

Address _____ Phone _____
Street City Zip

Parent/Legal Guardian Name _____

I declare under penalty of perjury under the laws of the State of Washington that the information provided here is true and correct.

Parent/Guardian Signature _____ Date _____

OR

Unaccompanied Youth Signature _____ Date _____

For School Personnel Use Only

If student is missing enrollment records, please contact the student's previous school for records.
The following records are still missing:

- Birth certificate
- Immunizations
- Medical records
- Prior academic records

School Personnel Signature _____ Date _____

I hereby certify that the above named student qualifies for rights and services under the McKinney-Vento Act.

District Homeless Liaison Signature _____ Date _____