



Student Housing Form

Confidential

Is your student's living arrangement temporary or due to the loss of housing or economic hardship?		YES	NO	
<i>If you answered YES, please complete the rest of the form. If you answered NO, you do not need to continue</i>				
Student Name (First and Last)	Student No.	Grade	Gender	Ethnicity/Race
Current School or Last Attended	Enrolled in School?	Age	Date of Birth	Parent/Guardian Email
Address	Parent/ Guardian Name		Phone	Language
City, State, Zip	Parent/ Guardian Name		Phone	Language

Please list all siblings or other children in the home: (use back if needed)					
Name	Student ID	Grade	Age	Sibling? Y/N	School (if any)

Student's living situation:		
YES	NO	
		Student lives with a parent or guardian
		Staying in a motel/hotel
		Sharing the housing of others due to loss of housing, economic hardship, or similar reason.
		Living in a car, park, campsite, trailer park, bus/ train station, abandoned building, or other location not ordinarily used as sleeping accommodations.
		Student is temporarily placed with relative or guardian.
		Student lives at a temporary shelter
		Transitional Housing (<i>a program going from homeless to independent living usually within 24 months</i>)
		Migrant
Other (please explain):		

Parent/Guardian/Unaccompanied Youth Signature:

Name **Relationship** **Date**

This form is intended to address the requirements of the McKinney-Vento Act, 42 U.S.C. 11435. The questions on this form assist in determining if the student meets the eligibility criteria for services provided by the Everett Public Schools KIT (Kids In Transition) program. Presenting a false record or falsifying records is an offense under the Washington Administrative Code, Chapter 148-120-100, section 7.

School To Complete	Submitted by: _____ Building/ Dept: _____ Date: _____
---------------------------	---

**If Yes, send copy of form to Categorical Programs (originals in student file).*