Local Educational Agencies' Instructions for the Housing Questionnaire

Instructions:

Add your local educational agency (LEA) information to this form before sharing this with parents, guardians, families, and/or youth. The area reserved for the agency information is right under the heading and is also a fillable section under the title. The completed section will look similar to this:

Housing Questionnaire for



The parent, guardian, or youth will read and complete the middle sections of the Housing Questionnaire as it relates to the child or children's names, nighttime residency, contact information, and other children living with parent or guardian.

The LEA will need to complete the bottom portion of the Housing Questionnaire. There are three fillable sections: one for the name of your LEA's Homeless Liaison, one for their phone number, and one for their email address.

This form should be included as part of the registration materials that the LEA shares with families and youth. This form is intended to be used as a template or as a standalone depending on your LEA's current enrollment forms.

For further guidance on the use or completion of, or any questions about, the Housing Questionnaire, please access the Guidance for Completion of Housing Questionnaire (https://www.cde.ca.gov/sp/hs/cy/documents/guidanceforquestionnaire.docx). The guidance provides the LEA with detailed information around the purpose and use of, data/information sharing concerns regarding, and how to best use the Housing Questionnaire with families and youth.

If you have any questions regarding this subject, please contact the California Department of Education Homeless Education Program within the Integrated Student Support and Programs Office by phone at 866-856-8214, or by email at HOMELESSED@cde.ca.gov.

Housing Questionnaire for

Student Last Name	First	Middle

Name of School:

The information provided below will help the LEA determine what services you and/or your child may be eligible to receive. This could include additional educational services through Title I, Part A and/or the federal McKinney-Vento Assistance Act. The information provided on this form will be kept confidential and only shared with appropriate school district and site staff.

Presently, are you and/or your family living in any of the following situations?

- ☐ Staying in a shelter (family shelter, domestic violence shelter, youth shelter) or Federal Emergency Management Agency (FEMA) trailer
- ☐ Sharing housing with other(s) due to loss of housing, economic hardship, natural disaster, lack of adequate housing, or similar reason
- ☐ Living in a car, park, campground, abandoned building, or other inadequate accommodations (i.e. lack of water, electricity, or heat)
- ☐ Temporarily living in a motel or hotel due to loss of housing, economic hardship, natural disaster, or similar reason
- ☐ Living in a single-home residence that is permanent

I am a student under the age of 18 and living apart from parent(s) or guardian

○ Yes ○ No

The undersigned parent/guardian certifies that the information provided above is correct and accurate.

Print Parent/Guardian Name	Signature	Date

Phone Number	Street Address	City	State	Zip

Your child or children may have the right to:

- Immediate enrollment in the school they last attended (school of origin) or the local school where you are currently staying, even if you do not have all the documents normally required at the time of enrollment.
- Continue to attend their school of origin, if requested by you and it is in the best interest.
- Receive transportation to and from their school of origin, the same special programs and services, if needed, as provided to all other children, including free meals and Title I.
- Receive the full protections and services provided under all federal and state laws, as it relates to homeless children, youth, and their families.

Please list all children currently living with you.

Name	Gender	Birthdate	Grade	School

If you have any questions about these rights, please contact your LEA's Homeless Liaison:

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