

McKinney-Vento: Student Housing Questionnaire (SHQ)

This document is intended to address the McKinney-Vento Assistance Act. Your answers will help determine if the student meets eligibility requirements for services under the McKinney-Vento Act.

| Schoo | ol Name: | | | | | |
|--------|---|---|--------|---------------------------|--|--|
| Stude | ent Name: | | | | | |
| Paren | nt/Guardian Name: | | | | | |
| Phone | e Number: | | | | | |
| Street | t Address: | | | | | |
| City: | | | State: | Zip Code: | | |
| Stude | ent Age: | Grade: | | Date of Birth: | | |
| Is the | e address above 🗆 Ter | nporary 🛛 Perm | nanent | | | |
| 1. | Are you a student under the age of 18 and living apart from your parents or guardians? □Yes □No | | | | | |
| 2. | Please choose which of the following situations that the student currently resides in (you can choose more than one): □House or apartment with parent or guardian. □Motel, car, or campsite. □Shelter or other temporary housing. □With friends or family members (other than or in addition to parent/guardian). | | | | | |
| 3. | If you are living in sha Loss of housing. Economic situation. Temporarily waiting Provide care for a far Living with boyfriend Loss of employment. Parent/Guardian is of Other: Please explain | for house or apartm nily member. l/girlfriend. leployed. | | owing reasons that apply: | | |

Students without fixed, regular, and adequate nighttime residences have the following rights:

- 1. Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all of the documents normally required at the time of enrollment without fear of being separated or treated differently due to their housing situations;
- 2. Transportation to the school of origin for the regular school day; 3) Access to free meals, Title I and other educational programs, and transportation to extra-curricular activities to the same extent that it is offered to other students.

Any questions about these rights can be directed to the local McKinney-Vento liaison at your charter school, the McKinney-Vento Liaison at the State Public Charter School Authority or the State Coordinator at the Nevada Department of Education (NDE).

By signing below, I acknowledge that I have received and understand the above rights.

| Signature of Parent/Guardian or Unaccompanied Minor | Date | |
|---|------|--|
| Signature of School McKinney-Vento Liaison | Date | |
| | | |

Printed Name of School McKinney-Vento Liaison