

Federal and State Programs

9361 South 300 East - Sandy, UT 84070 T: 801-826-5111

www.canyonsdistrict.org

STUDENT HOUSING QUESTIONNAIRE FOR MCKINNEY-VENTO ELIGIBILITY

This form must be completed for all students before the registration form is done

	P: .		<u> </u>	Student #	udent #:	
	First	Middle	Last			
Name of School:		Grade:	Birth Date:		Age:	
2.1 1.11 1	.1 1			MM DD YYYY		
Other children living i				School	Crade	
	Name			3011001	Grade	
3. As a student,	are you living with sor	ent due to a loss of housing neone other than your par red NO to all of the above of of the above questions, plo	ent or legal guardian	op here.	□ NO □ NO	
 1. With mor 2. In a mote 3. In a shelte 4. In a locati 5. Living in a 	l/hotel er or Transitional Hous on not designed for slo a place without adequa	Please check one) house or apartment due to sing (through community a eeping accommodations so ate facilities (no heat, elect otel/hotel, shelter, or "ger	agency) ach as a car, park, or ricity, water, etc.)	campsite	imilar reason	
1. With mor 2. In a mote 3. In a shelte 4. In a locati 5. Living in a	e than one family in a layhotel er or Transitional House on not designed for slea a place without adequates esidence, or name of m	house or apartment due to sing (through community seeping accommodations so ate facilities (no heat, elect	agency) uch as a car, park, or ricity, water, etc.) ueral area" of curren	campsite t residence:		
1. With mor 2. In a mote 3. In a shelte 4. In a locati 5. Living in a Address of current re	e than one family in a l/hotel er or Transitional Hous ion not designed for slo a place without adequa esidence, or name of m	house or apartment due to sing (through community a eeping accommodations so ate facilities (no heat, elect otel/hotel, shelter, or "ger	agency) uch as a car, park, or ricity, water, etc.) ueral area" of curren whone number or con	campsite t residence: ntact number:()	
1. With mor 2. In a mote 3. In a shelte 4. In a locati 5. Living in a Address of current re Name of Contact: Print Name of legal g	e than one family in a layhotel er or Transitional House on not designed for sleat place without adequates idence, or name of mutuardian(s)/caretaker(house or apartment due to sing (through community a eeping accommodations so ate facilities (no heat, elect otel/hotel, shelter, or "ger 	agency) uch as a car, park, or ricity, water, etc.) neral area" of curren whone number or con h:	campsite t residence: ntact number: _()	

For School Staff Only: Forward questionnaire to Educational Liaison Connie Crosby in the Federal & State Programs Department. Office Phone: (801) 826-5396.