



Torrance Unified School District



*** SCHOOLS - PLEASE NOTE ***

THESE FORMS MUST BE KEPT IN A CONFIDENTIAL FILE SEPARATE FROM STUDENT CUMULATIVE RECORDS

Student Housing Questionnaire

This form is intended to address the McKinney Vento Act 42.U.S.C.11435. The information you provide is confidential. Your child/children will not be discriminated against based upon the information provided. Please complete the following questions regarding the student's housing in order to help determine any services the student(s) may be eligible to receive.

** If this form is filled out at the school site, please SCAN and EMAIL this form to FWEC to establish eligibility. Email: FWEC@tUSD.org

By signing this form, I declare under penalty of the laws of the state of California that the foregoing is true and correct. In addition, I understand that the district reserves the right to verify any listed residency information.

Parent / Guardian or Unaccompanied Youth NAME Parent / Guardian or Unaccompanied Youth SIGNATURE DATE

Check the ONE option that best describes your nighttime residence:

Table with columns: CHECK, NIGHTTIME RESIDENCE, CODE. Rows include: Temporarily Doubled Up, Shelter, Hotel / Motel, Other Temporary Living Situation, NONE OF THE ABOVE APPLY.

STUDENT INFORMATION

Form fields for Student #1, Student #2, Student #3, Student #4 including Date of Birth, Nighttime Location, Mailing Address, and Phone.

Your child/ren may have the right to: Immediate enrollment despite missing documents at last school attended or where you are currently staying, continue at their school of origin, receive transportation, receive full protections & services provided under all federal and state laws as it relates to homeless children, youth and families.

If you have any questions about your rights, please contact the district's homeless liaison gutierrez.nancy@tUSD.org 310 972 6146

OFFICE USE ONLY

Form fields for Student #1, Student #2, Student #3 including ID#, SCH, GRADE, F, M, 190, TI, PR, E, SE, L.

20 ___ / ___ Eligible: Yes [] No [] Approved: _____ []Coordinator []BHC