



1306 Dupont Street
Bellingham, Washington 98225
(360) 676-6400
bellinghamschools.org

Student Housing Form

Please use one form per family. Return to the school office.

CHILD'S NAME: FIRST MIDDLE LAST

NAME OF SCHOOL: GRADE: BIRTH DATE: MONTH DAY YEAR AGE:

OTHER CHILDREN LIVING IN THE HOME:

Name: School:
Name: School:
Name: School:

The answers to the following questions can help determine the services this student may be eligible to receive under the McKinney-Vento Act 42 U.S.C. 11435.

- 1. Is this student's home address a temporary living arrangement, other than rental?
2. Is this a temporary living arrangement due to a loss of housing or economic hardship?
3. Is this student in a foster care placement?
4. As a student, are you living with someone other than your parent or legal guardian?
5. Was student eligible for homeless services the previous school year, or at the last school district they attended?

If you answered YES to any of the above questions, please complete the remainder of this form.
If you answered NO to all of the above questions, you may stop here.

Where is this student currently living? (check box)

- In a motel
In a shelter
With more than one family in a house or apartment
Moving from place to place
In a location not designed for sleeping accommodations such as a car, park or campsite
Transitional housing (through community agency)
Foster Care

ADDRESS OF CURRENT RESIDENCE:
(OR)
NAME OF MOTEL /SHELTER OF CURRENT RESIDENCE:
(OR)
NAME OF "GENERAL AREA" OF CURRENT RESIDENCE:

PHONE NUMBER OR CONTACT NUMBER: NAME OF CONTACT:

Print name of parent(s)/legal guardians(s):
(Or unaccompanied youth)
Signature of parent/legal guardian: Date: