This form is intended to address the McKinney-Vento Act. Your answers will help determine residency documents and certain needs for the student.

Presently, where is the *student* living? (Check one)

|  |  |
| --- | --- |
| **Section A**[ ]  In a shelter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Shelter Name[ ]  In a motel [ ]  *Temporarily* with more than one family  (due to loss of job, loss of housing, etc.)[ ]  In a car, park, campsite, or other place  not designated for ordinary housing.[ ]  Alone without parental support  (independent living Student)**CONTINUE**If you checked a box in this section, please *complete the rest of this form*. | **Section B**[ ]  Choices in Section A do NOT apply.**STOP** If you checked this section, you do *not* need to complete the remainder of this form. |

Student Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  Male [ ]  Female

Parent/Guardian(s)

Current Address

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_ Phone

Last School Attended \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State

***THIS AREA FOR STAFF USE:***

At time of enrollment, please check off documents that are presented:

*Date Enrolled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

\_\_\_\_\_\_\_Address Verification \_\_\_\_\_\_\_\_Birth Certificate \_\_\_\_\_\_\_\_Immunization \_\_\_\_\_\_\_\_Previous School Records

***\*\*\*Please admit student immediately while documentation is being obtained\*\*\****

**If Section A is checked:**

Instructions for Office Staff – Make a copy of the completed form. Send it via interschool mail to the McKinney-Vento Coordinator. The homeless liaison will notify Nutrition Services regarding meal status. (Meal Application not needed – only the Waiver of Confidentiality needs to be filled out for these families.)