

McKinney-Vento Homeless Assistance Act Confidential Enrollment Form COMPLETE ONE FORM PER STUDENT

Your child/children may be eligible for additional support under the Federal McKinney-Vento Assistance Act. Eligibility can be determined by completing this form.

Complete this form if any of the following describes your living situation. CHECK ALL THAT APPLY.

□ Sharing housing with another due	to loss of ho	ousing,	economic hards	hip, natura	1
disaster, or similar reason					
□ Staying in a shelter or transitional	_				
(Name of agency you are working)	
□ Temporarily living in a motel or ho			ousing, economi	c hardship,	, natural
disaster, or similar reason (Name		`)
 Living in a car, park, campground, accommodations 	, abandoned	buildin	g, or other inade	equate	
□ Living alone as a minor student without an adult					
 This form does not apply 					
Print Parent/Guardian Name Signature			******	*****	*****
Print Parent/Guardian Name	Signat	ure			Date
	Signat t Address	ure	City		Date Zip Code
	t Address	rure	City		
(Area Code) Phone Number Street	t Address	ure M/F	City	GRADE	
(Area Code) Phone Number Street Name of student enrolled at the school	t Address			GRADE	Zip Code

Office staff next steps:

- 1. Code student in Program Field in AERIES
- 2. Email copy to Student Services and Food Services
- 3. All original forms maintained in a separate file and destroyed after the school year ends.