McKinney-Vento Assistance Act
Confidential Enrollment Form

This form assists school personnel in complying with the legal guidelines for school enrollment for children who meet the eligibility criteria for services provided under the McKinney-Vento Assistance Act (Title X, Part C of the No Child Left Behind Act).

Please Print

Date		**School**	

Student's Name_____ Grade_____
(Last Name) (First Name)

Student's Date of Birth_____
(Month) (Day) (Year)

Parent/Guardian Name_____ **Unaccompanied Youth:** Y N
(Last Name) (First Name)

Address_____

Telephone Number ( ) _____

PLEASE CHECK THE FOLLOWING LIVING SITUATION THAT APPLIES TO THE STUDENT:

_____ **Living in home, rented home, or apartment (one family)**

_____ **Living with friends or relatives (own choice)**

_____ **Due to economic hardship, loss of housing, foreclosure, loss of job, or similar reason, temporarily living with friends or relatives. Please explain:**_____
(For example: Rent a room.)

_____ **Section 8 housing or subsidized housing**

_____ **Living in a shelter or transitional housing**

_____ **Living in a hotel or motel**

_____ **Living in a campground, park, or car**

_____ **Awaiting foster care placement**

_____ **Living in other circumstances (please** _____

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Parent Signature: **Date:**

For District Office Use Only

State and Federal Programs
Food and Nutrition Services
Transportation
Family Resource Center
Backpack/School Supplies

Site Signature: _____

Retain a copy for site

Original to State and Federal Programs	Yellow to Food/Nutrition Services