

SAMPLE FORM
Homeless Education Phone Contact Script

Name of Family Called: _____

I'm calling from _____ School District). My name is ____ and I assist with a federal program which provides services to families that meet certain criteria.

One of these criteria is that the family lives with other families in the same residence. After obtaining information from our student data system, your child/children's information shows that you may be living under these circumstances.

I'm calling, then, to verify that you do live with at least one other family and to determine if your children would qualify to receive services under this program.

Do you mind if I ask you some questions?

1. Do you live with other families in the same residence? (If no, they don't qualify.)
2. Do you own the residence where you are living? (If yes, they don't qualify!)
3. (If no) Do you rent a room or space from one of the families in this residence? (If they say no, then ask) Tell me about your living situation.
4. (If yes) How long have you rented from this family?
5. You may qualify for services under this program, then. I have just a few more questions.
 - a. How many different schools have your children attended?
 - b. Are your children performing at grade level?
 - c. Do your children have sufficient clothing and other school supplies?
6. (If in your judgment they should qualify for services...) Would you like to receive services under the Homeless Education Assistance Act (McKinney-Vento)? I'd like to make an appointment with you to see how we can best meet your needs.