

McKinney-Vento Referral Form

(One form per family)
Submit online at: <u>bit.ly/xxxxxxxxx</u>

The McKinney-Vento Act ensures that all school-aged children and youth experiencing homelessness are entitled to the same free and appropriate public education that is provided to non-homeless students.

Definition of Homeless: A student between the ages of 0 to 22, who lacks a fixed, regular, and adequate nighttime residence. Specifically, if students live under any of these conditions:

- Living in a shelter (family, youth or domestic violence shelter or transitional living program)
- Living in a motel, hotel or weekly rate housing
- Living in a house or apartment with more than one family because of economic hardship or loss

Referring Person:__

- Living in an abandoned building, in a car, at a campground or on the street
- Living in substandard housing (without electricity, heat or water)
- Living with friends or family because youth is a runaway or unaccompanied youth

REFERRING AGENCY INFORMATION

Referral Date:_____

This is a referral form for service providers to refer students to their homeless education liaisons to determine eligibility for services at their school site. Please complete this form and scan/email to Rolando Hernandez at rhernandez@kern.org.

PLEASE DO NOT complete this form if family housing situation is FIXED, REGULAR, AND ADEQUATE (ex., if they rent, share housing for convenience, or if they are buying a house and do not need support services).

Agency	_ Phone:	Email:				
Family/youth notified of referral:	Yes N	o Maybe	N/A			
STUDENT INFORMATION						
School-Aged Children (List oldest ch	ild first)		Receiving Special	Current or Last School		
Last/First Name		DOB	Ed. Services	Enrolled	Grade	Gender
			Yes No Unknown			M F
			Yes No Unknown			M F
			Yes No Unknown			M F
			Yes No Unknown			M F
Non-School-Aged Children Last/First Name		DOB	Receiving Special Ed. Services	Receiving Early Child- hood Ed. Services		Gender
			Yes No Unknown	Yes No Unknown		M F

Yes No Unknown

Yes No Unknown

Yes No Unknown Yes No Unknown

Yes No Unknown

Yes No Unknown

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M

M F

Presently, where is the student(s) living? (Please check all that may apply): Sharing Housing (Doubled Up) with Family or Friends Due to an Economic Hardship, Natural Disaster **Unaccompanied Youth** Hotels/Motels Substandard/Inadequate Housing Emergency/Temporary/Short Term/Transitional Shelter Other (please describe):_____ Unsheltered (Cars, Parks, Campgrounds, etc) Abandoned Building The student(s) is/are (Check one box): ...in the physical custody of a parent or guardianNOT in the physical custody of a parent or guardian (example: living alone, with a relative who is not student's legal guardian, living with other people). **FAMILY CONTACT INFORMATION** Parent/Guardian:______ Relationship:_____ Temporary Address: _____ City:_____ Cell Phone:_____ Add'l Phone:_____ Email: ____ Language Spoken:_____ How long has/have the student(s) been in the TEMPORARY place? SERVICE INFORMATION What educational and related services are you aware this family may need?: (check all that may apply): Transportation for Child/Children to ☐ After-school Programs ☐ Special Security/Safety Issues Get to School ☐ English as Second Language Truancy Issues Help with Enrollment School/health records needed ☐ Referrals to Outside Agencies (Food, **School Supplies** School Clothes/Warm Winter Housing, Social Service, Mental Health) Tutoring or Other Instructional Sup-Clothes Other, please specify: Credit waiver approval for 11th & port **Special Education Services** 12th graders 504 Accommodation ☐ Independent financial aid status

HOUSING INFORMATION

Gifted or Talented Programs

Pre-school Programs

Thank you for taking time to fill out this referral, please scan/email this form to Rolando Hernandez, KCSOS Education Liaison at rhernandez@kern.org. Our program will link the family with district services and you will receive feedback about the outcome of the referral. Please call 661-636-4992 if you have any further questions or concerns.

verification for unaccompanied,

homeless 12th graders

Kern County Superintendent of Schools Office McKinney-Vento Homeless Program Rolando Hernandez 661-636-4992 Email: rhernandez@kern.org