McKinney-Vento Program
Intake Form

Student Name:	**Student #:**	**Grade:**	**Gender:**	**Ethnicity:** □ African American □ Asian □ Caucasian □ Hispanic □ Native American □ Other
Current School or Last Attended:	**Enrolled in School?** □ Yes □ No	**Age:**	**Date of Birth:**	
Current Address:	**Parent/Guardian:**	**Phone:**		

Please list siblings or other children in the home:

Name	Student #	Grade	Age	School *(if not enrolled, please indicate)*

Student's living situation:

□ Shelter □ Doubled Up[1] □ Temporary Placement[4]
□ Unsheltered[2] □ Motel/Hotel □ Migrant
□ Unaccompanied Youth[3] □ Awaiting Foster Care □ Transitional Housing

[1]Sharing the housing of other persons due to loss of housing, economic hardship, or similar reason
[2]Living in a car, park, campsite, trailer park, bus/train station, abandoned building, abandoned hospital, or other location not ordinarily used as sleeping accommodations
[3]Unaccompanied youth not living with a parent or guardian
[4]Child temporarily placed with relative or friend

Is your current residence a temporary living situation? □ Yes □No
Is your living arrangement due to the loss of housing or economic hardship? □ Yes □No

Please check the following services that are needed or desired:

□ Free breakfast/lunch
□ Transportation
□ Clothing/Uniform
□ School supplies
□ Counseling
□ Medical/dental referral – medical coupons
□ Vision referral
□ Medicaid/DSHS services – food stamps
□ Preschool Enrollment records
□ Missing enrollment records
___Birth certificate
___Immunization/medical records
___Prior academic records
___Guardianship issues
□ Tutoring
□ After-school programs
□ Teen Center
□ Mentoring
□ Special Education
□ Gifted/talented
□ Vocational/technical
□ Community resource
□ LEP/Bilingual program
□ Trust/financial assistance needed for _____ Cost $_____

Comments/Changes:

_____

Parent/Guardian/Unaccompanied Youth Signature:

_____
Name **Date**

Building/District Liaison Signature:

_____
Name **Date**

Send copy to District McKinney-Vento Office at Tone Resource Center (fax: 253.571.1928)