

	McKinney-Vento Act Confidential Enrollment Form
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This form assists school personnel in complying with the legal guidelines for school enrollment for children who meet 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 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 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 Idaho that the foregoing is true and correct.

Parent Signature: _____ Date: _____