

# [LEA Letterhead]

## TITLE X, PART C MCKINNEY-VENTO CONFIDENTIAL REFERRAL FORM

**Louisiana School District** \_\_\_\_\_

**Date** \_\_\_\_\_ **Not In School** \_\_\_\_\_

**Student** \_\_\_\_\_ (M/F) **Parent/Guardian** \_\_\_\_\_ **Race** \_\_\_\_\_

School \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Special Ed: Yes \_\_\_\_\_ No \_\_\_\_\_

I.D.# \_\_\_\_\_ D.O.B. \_\_\_\_\_ Phone Number \_\_\_\_\_

Temporary Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Referring Person \_\_\_\_\_ Position \_\_\_\_\_

Reason for referral: Problems listed below often prevent homeless children and youth from attending school. Please check the areas of concern which apply to the student identified above.

- \_\_\_ School of origin: Yes  No
- \_\_\_ Student lacks a permanent residence
- \_\_\_ Student is unable to pay school fees
- \_\_\_ Immunizations are needed
- \_\_\_ Birth certificate is needed
- \_\_\_ Excessive absences are a problem
- \_\_\_ Lacks academic records and/or documentation
- \_\_\_ Academic problems indicate a need for tutoring
- \_\_\_ School supplies are needed
- \_\_\_ Transportation to school is a problem
- \_\_\_ Student/family needs assistance accessing community resources
- \_\_\_ Behavior indicates a need for mental health counseling
- \_\_\_ School clothes are needed (Sizes: Shirt \_\_\_\_\_ Pants \_\_\_\_\_ Shoes \_\_\_\_\_ Other \_\_\_\_\_)
- \_\_\_ Free lunch form needed
- \_\_\_ Health problems are indicated
- \_\_\_ Need Health Insurance (LA CHIP/Medical Card)
- \_\_\_ Guardianship is a problem
- \_\_\_ IDEA (gifted, talented, disabilities) services needed
- \_\_\_ LEP/ESL services needed
- \_\_\_ Migrant services needed
- \_\_\_ Need SNAP benefits (food stamps)

Check all that apply:

- Sheltered (1)
- Doubled-Up (2)
- Unsheltered/FEMA (3)
- Hotel/Motel (4)
- Awaiting Foster Care Placement

Unaccompanied Youth: Yes  No

- 01 - Mortgage Foreclosure
- 02 - Flooding
- 03 - Hurricane
- 04 - Tropical Storm
- 05 - Tornado
- 06 - Wildfire or Fire
- 07 - Man-made Disaster (Major)
- 99 - Other: i.e., lack of affordable housing, long-term poverty, Unemployment or underemployment, lack of affordable, health care, mental illness, domestic violence, forced eviction, etc.

COMMENTS: \_\_\_\_\_

Other children in home: \_\_\_\_\_

\_\_\_\_\_  
School Personnel Signature Date Homeless Liaison's Signature Date

\*LIAISON'S SIGNATURE INDICATES STUDENT(S) MEET TITLE X, PART C REQUIREMENTS

- Copy sent to District Homeless Liaison
- Copy Placed in Student's Cumulative Record