



Together... We Build Tomorrow!

CLINT INDEPENDENT SCHOOL DISTRICT

Office of Federal Compensatory Programs

McKinney-Vento Homeless Education Assistance Program

REFERRAL

CONFIDENTIAL

Send original form to the Office of Federal Compensatory Programs and keep a copy for your records.

Agency/Campus _____

Staff member making referral _____

Date Referred _____ Student ID # _____

Student Name _____

Parent/Guardian Name _____

Phone # _____ Address _____

Homeless Status

* Check the appropriate status for the identified displaced student(s).

- Living with family
Separated from family
Foster care pending
Runaway
Unaccompanied Youth
Abandoned
Other (specify)

Living Arrangements

- In a shelter
Doubled-up
In a hotel/motel
Unsheltered (on the street, car, park, campground, abandoned building)
Other (specify)

Additional information on the homelessness to help assist student:

Action taken by staff making referral _____

Administrator's Signature

Date

Public Notification of Nondiscrimination:

It is the policy of Clint ISD not to discriminate on the basis of race, color, national origin, sex, religion, handicap or age in its employment practices as required by Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.