Baboquivari Unified School District MCKINNEY-VENTO HOMELESS EDUCATION FORM SCHOOL ____ Student ID#:___ Grade:____ Date of Birth Student Name (Last, First, Middle) Sex ☐ Perm ☐ Temporary Phone# Contact Name (Parent, Guardian, other) Address **Confidential Information** This Questionnaire is intended to address the McKinney-Vento Act; these questions will help determine eligibility for services for a student. Please see the attached page for details on the McKinney-Vento Act. *Failure to fill out this form in its entirety, may delay McKinney-Vento services. □ Shelter ☐ Live with family or friends due to financial problems. ☐ Motel/hotel, camping ground or other similar ☐ Temporarily housed in shelter awaiting foster care placement (MUST ATTACH NOTICE TO PROVIDER) situation due to lack of alternative, adequate ☐ Other (Doubled up with family/substandard housing) housing. ☐ In a place not designed for ordinary sleeping □ Disaster victim? accommodations: such as a car, park or abandoned building If you have checked any boxes please explain: List any other children attending BUSD:

Do you also have Pre-School children living with you? Yes _____ No _____

Are you a High School student living on your own? Yes _____ No _____

The form will better assist BUSD in ensuring student and families receive the services for which they are eligible. The information on this form is also required by law to comply with the McKinney-Vento Act 42 U.S.C 1134a (2), which is also known as Title X, Part C, of the NO CHILD LEFT BEHIND Act. NOTE: Presenting a false record or falsifying records is an offense, and enrollment of the student under false documents subjects the person liability for tuition or other costs. (ARS Section 13-2704 and Section 39-161)

Parent's/Guardian's Signature

Date

Original Eligibility Form is to remain at the school in McKinney-Vento binder, (NOT student CUM folder) Email or hand deliver a copy to Parent Liaison at your site within 5 business days.