INTAKE/ELIGIBILITY FORM FOR MIGRANT HOMELESS STUDENTS

TC	ODAY'S DATE:	METS:				
Pe	erson Completing Form:		New Sti	udent Y or N	V	
A.	Student Information					
	Student Name:					
	Date of Birth:		_Gender:	Male	Female	
	Unaccompanied Youth:					
	Parents/Guardians:					
	Address:					
	Telephone:	Shoe Size	?	Pajamas	Size	
	Other Contact Information:_					
В.	School Information District of Current Residence	y:				
	Date Family Entered Distric	t:	Grade	Building_		
	Currently Enrolled:Yes**No **If P0-P5Type of Program: ABCD UPK HS					
	More than 2 days between attempted and actual school enrollment?NoYe					
	Previous School District (Be					
<i>C</i> .	Night-time Residence					
	Shelters; Doubled U	¹ p; Unshe	ltered (e.g. ca	rs, parks, cam	pgrounds, etc.)	
	Hotels/Motels; Sub-	standard Housing_	; Tran	isitional Ho	ousing	
	Other (specify)					
D.	Needs:					
	School Registration	; Transportatio	n	; Tutori	ng	:
	Advocacy	; Referral for	Services			
	Other Assistance)					
Re	eviewed by:					
	METS Local Hon	ieless Liaison				
	Approved	Loca	al School District Notified			
		2000			Date	
	Disapproved					