SOUTHWEST LEADERSHIP ACADEMY

4301 W. FILLMORE STREET • PHOENIX • AZ • 85043 • 602-265-2000 • FAX 602-278-0953

WWW.SOUTHWESTLEADERSHIPACADEMY.COM

DR. GREG FOWLER- PRINCIPAL

Thank you for considering **Southwest Leadership Academy** for your student's educational needs and for allowing us to share with you the benefits and opportunities available at our school.

In an effort to review and process your student's registration application in an efficient and timely manner, **all forms must be turned into the School Office by the Parent or Guardian.** There are several **required** documents that will need to be provided along with the completed registration application, in order to have our records in compliance. We have included the following list for your convenience.

REQUIRED ENROLLMENT DOCUMENTS:

Complete Registration Application

– The following documents will be required by all students requesting enrollment to **Southwest Leadership Academy**.

Enrollment Application
Medical/Transportation Authorization
Family Educational Rights and Privacy Act
Parent/Family Involvement
Home Language Survey
Guidelines to Determine Eligible Students
Arizona Residency Form
Free and Reduced School Meal Application

Additional information required to complete the enrollment process.

- ❑ **Birth Certificate** – Proof of Birth (Baptismal Certificate or Passport)
- ❑ **Immunization Records** – Proof of all required immunizations or a valid exemption
- ❑ **Proof of Residency**
- ❑ **Transcripts / Academic Progress**
- ❑ **Withdrawal Form** (Previous School)
- ❑ **AZ Merit Test Results / Academic Assessments** (if applicable)
- ❑ **Current IEP** (if applicable)
- ❑ **Current MET** (Re-Evaluation including last completed Psychological Evaluations)
- ❑ **Current 504 Plan** (including all documentation)

Referred By:

❑Friend ❑Sibling ❑Brochure/Flyer ❑Drive-By

❑Student ❑Internet ❑School ❑Social Media

❑Other_____

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2021/2022
Enrollment Application
Applicant Information

Date: _____ **Grade:** _____

Legal Name _____
Last Name (Enter name exactly as it appears on official documents) First Name Middle Jr. etc

Birth Date _____ **Male**_____ **Female**_____ **Age** _____ **Birth City**_____ **Birth State** _____
mm/dd/yyyy

Current Mailing Address _____
Number & Street Apartment #

_____
City/Town State/Province County Zip/Postal Code

Phone Number _____

Family

Student Lives With: ❑ Both Parents ❑ Mother ❑Father ❑Legal Guardian ❑Relative ❑Ward of the Court ❑Other

If parents live separately, who will receive mailings? ❑Both Parents ❑Mother ❑Father ❑Guardian ❑Relative ❑Other

If both wish to receive mailings please include 2nd mailing address.

2nd Mailing Address: _____ **City** _____ **State** _____ **Zip Code** _____

Parent 1: ❑Mother ❑Father ❑Legal Guardian

_____
Last Name **First Name**

Home address **if different** from above

_____
Number & Street Apartment #

_____
City/Town State/Province Zip Code

Home Phone (_____) _____

Cell Phone (_____) _____

Work Phone (_____) _____

E-mail _____

Occupation _____

Employer_____

Parent Signature_____

Parent 2: ❑Mother ❑Father ❑Legal Guardian

_____
Last Name **First Name**

Home address **if different** from above

_____
Number & Street Apartment #

_____
City/Town State/Province Zip Code

Home Phone (_____) _____

Cell Phone (_____) _____

Work Phone (_____) _____

E-mail _____

Occupation _____

Employer_____

Student Signature_____

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Emergency Contact Information

Contact 1

_____

Last Name **First Name**

Relationship to Student _____

Home Phone (_____) _____

Cell Phone (_____) _____

Work Phone (_____) _____

Is this person authorized to release student? ❑Yes ❑No

Contact 2

_____

Last Name **First Name**

Relationship to Student _____

Home Phone (_____) _____

Cell Phone (_____) _____

Work Phone (_____) _____

Is this person authorized to release student? ❑Yes ❑No

Rights Under Title IX

Southwest Leadership Academy does not discriminate on the basis of race, color, national origin, sex or handicap in its educational program or activities as required by Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and of Section 504 of the Rehabilitation Act of 1973, respectively.

Title One Parent Involvement Policy

Southwest Leadership Academy will put into operation programs, activities and procedures for the involvement of parents in all of its schools with Title I, Part A programs, consistent with section 1118 of the Elementary and Secondary Education Act (ESEA). Those programs, activities and procedures will be planned and operated with meaningful consultation with parents of participating students.

Student Personal Information Release

Southwest Leadership Academy, occasionally publishes the first name and/or pictures of students involved in school activities on our web site and other forms of media. This form gives you the option to choose if you would like your child's first name and/or pictures featuring your child, published on our website and other media.

I, _____, **Do Not Want** Southwest Leadership Academy, to publish the following information for my student:

❑Student's name (first name only) on the school's website.

❑Student's photo on the school's website.

❑Student's photo and full name in ROP Publications, ROP newsletters, local Newspaper articles, etc.

❑Student to appear on Television.

❑Student's photo (no names) in ROP advertising venues; brochures, newspapers ads, etc.

Parent Signature_____ **Student Signature** _____

Permission for Internet Usage

This does not replace the Technology Policy or imply permission to use the school's internet services. Publication of this data is not required to use internet services.

I, _____, authorize my student, _____ to use the World Wide Web for research & classroom assignments/projects.

Signature of Parent/Guardian_____

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Demographics

Home Language Survey

This question is in compliance with A.R.S. 15-756. **Identification of English Language Learners.** Your response to the following question will be used to determine whether your student will be assessed for English language proficiency:

What language do people speak in the home most of the time?
Language most often used by the student

_____

What language does the student speak most of the time?
Language most often spoken by the student

_____

What language did the student first speak or understand?
Language first acquired by the student

_____

Are you proficient in any other languages?

_____

Demographic Questionnaire

Presently, where does the student stay at night?

❑Yes ❑No Student's immediate family resides in their own home or apartment. (No one outside of the immediate family is present)

❑Yes ❑No With Grandparents, Aunt, Uncle or other family member who is not immediate family.

❑Yes ❑No With more than one family member in a house or an apartment.

❑Yes ❑No In a group home or group shelter.

❑Yes ❑No In a motel.

❑Yes ❑No In a car.

❑Yes ❑No Other:_____

Military Student Identifier

❑ Student is a dependent of a member of the Army, Navy, Air Force, Marine Corps, or Coast Guard on Active Duty

❑ Student is a dependent of a member of the Arizona Army National Guard (Army, Air Force or State Guard)

❑ Student is a dependent of a member of a reserve force in the United States military (Army, Navy, Air Force, Marine Corps or Coast Guard)

❑ None of the above

Race and Ethnicity Data Collection

In accordance with federal guidance, a two-part question must be used to collect data about student race and ethnicity. The first part of the question is on ethnicity and the second is on race. The race question can have multiple values.

Part 1: Ethnicity

Is this student Hispanic or Latino?

❑ No, not Hispanic or Latino

❑ Yes, Hispanic or Latino (A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)

Part 2: Race

What is the student's race? (Regardless of how student answered the first question, choose one or more)

❑ **American Indian or Alaska Native** (A person having origins in any of the original tribe of North and South America, including Central America, and who maintains affiliation or community attachment.)

❑ **Asian** (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)

❑ **Black or African American** (A person having origins in any of the black racial groups of Africa.)

❑ **Native Hawaiian or Other Pacific Islander** (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

❑ **White** (A person having origins in any of the original peoples of Europe, the Middle East or North Africa.)

Asbestos:

Asbestos materials were not identified within any Rite of Passage structures; however the EPA requires an asbestos management plan (MP). The MP is available for review in the administrative office of each campus. Thank you.

Parent Signature_____

Student Signature_____

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2021/2022

STUDENT EMERGENCY INFORMATION AND TRANSPORTATION PERMISSION FORM

Name of Student _____

Date of Birth _____ **Male or Female** _____ **Age** _____

Parent/Guardian Name(s) _____

Address _____**Zip** _____

Home Phone (_____)_____

Mother Name_____ **Mother Home Phone** (_____) _____
Cell Phone (_____) _____
Father Name_____ **Father Home Phone** (_____) _____
Cell Phone (_____) _____
Guardian Name_____ **Guardian Home Phone** (_____) _____
Cell Phone (_____) _____
Emergency Contact_____ **Relation to Student** _____
(Other than parent/guardian) **Phone (_____)** _____

Medical Insurance Carrier _____ Policy Number_____

Name of Insured _____ I.D. Number _____

Physician Name_____ Phone_____ Hospital Preference_____

********** **Please Note: <u>There is not a school nurse on campus.</u>** **********

Does this student have any medical, physical, or mental health conditions the school should be aware of? ❑No ❑Yes
If yes, please explain. _____

Does this student need to take any medications? ❑ No ❑Yes: Medication(s) _____
Dosage and Time of Day _____

If yes, will these medications be taken during school hours: ❑ No ❑Yes

Is the student allergic to any medication? ❑No ❑Yes: Medication(s) _____

Is the student allergic to any foods? ❑No ❑Yes: Foods(s) _____

I authorize a school representative to dispense my student's prescription medication according to the instructions. If my student's medication changes, I will notify the school immediately. I understand students are not to keep their own prescription medications. I will notify the school in advance if my student requires an inhaler during school hours.

I hereby give permission for my student listed above to be transported by Southwest Leadership Academy for the purpose of school related activities.

Parent/Guardian Signature _____ **Date** _____

I also give agents of Southwest Leadership Academy permission to authorize any emergency medical treatment that may become necessary while my student is in school in the event that I cannot be reached. Furthermore, I realize that any expenses related to medical attention given are my responsibility.

Parent/Guardian Signature _____ **Date** _____

In case of injury or sudden illness, I hereby give authorization to any hospital or doctor to render immediate aide as might be required at the time, for his/her health and safety. I understand that the expense of this service will be my responsibility.

Parent/Guardian Signature_____ **Date** _____

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Academic Information

Current Grade for 2021/2022: _____

_____ _____ _____

Current or Last School Attended (**District**) City State

_____/_____/_____ _____

Last Date of Attendance Grade

Are you current on credits? ❑Yes ❑No **(Please submit an unofficial transcript along with this enrollment application.)**

Is the student a primary caregiver or financially responsible for dependents and may require a flexible school schedule?

❑Yes ❑No If yes, explain: _____

As a primary caregiver, does the student require daycare for a dependent 0-5 years of age?

❑Yes ❑No If yes, explain: _____

Have you ever been found responsible for a disciplinary violation at any educational institution you have attended, whether related to academic misconduct or behavioral misconduct, which resulted in your probation, suspension, removal, dismissal, or expulsion from the institution?

❑Yes ❑No If yes, explain: _____

Currently on: ❑Probation ❑Parole ❑N/A Parole or Probation Officer Name _____

Has the student been out of school for: ❑ 1-4 weeks ❑ One semester ❑ One year ❑ Two years

If yes, explain: _____

What is your future job or career goals? _____

Educational Background / Accommodations

Exceptional Student Services

In order to provide continuity in the educational environment, it is important that Southwest Leadership Academy be informed of any special education services received by the student.

❑ Yes ❑ No Does the student have any learning or behavioral needs?
Please give a brief explanation: _____

❑ Yes ❑ No Does the student receive Special Education Services Date of last I.E.P._____
Resource ❑Yes ❑No Self Contained ❑Yes ❑No
Other (Please Explain_____

❑ Yes ❑ No My child **has** had special education testing or evaluations

❑ Yes ❑ No My child **has** been enrolled in a special education program at another school.

❑ Yes ❑ No My child is on a 504 Plan.

❑ Yes ❑ No My child is involved in an English as a second language program (ELL).

Inclusive Education Philosophy

Southwest Leadership Academy embraces the philosophy of inclusion, believing that special education students can best be educated in the regular classroom. Our teachers accept responsibility for all students in their classroom and modify, accommodate and adjust teaching techniques and classroom activities to meet the unique learning abilities of all students. Special education staff supports the regular classroom teacher with this process. There are not two distinctly different types of students, e.g. "special" and "regular". All students are individuals with their own unique set of physical, intellectual and psychological characteristics that influence their instructional needs. There are not two discrete sets of instructional methods – one set for "special" students and another for "regular" students. Individualized instructional programs are designed for each student.

Basic Beliefs and Expectations

- Inclusion is the underlying philosophy by which all students are educated.
- All students are educated with chronologically age appropriate peers.
- All students are educated full time in the general education classroom.
- All students learn and develop individually and the curriculum is modified or adapted to allow students to progress at their individual rates. Students are not penalized for the inability to progress at grade level.
- General education teachers assume responsibility to teach and meet the cognitive, affective and social needs of all students with special education teachers and staff providing support.
- Teaching strategies that facilitate the education of multi-level abilities in each class are used by all teachers (e.g. cooperative learning, project learning, mastery learning, and curriculum compacting, independent projects, flexible groupings, learning centers, and teaching to learning styles such as visual, auditory and manipulative)

Parent Signature_____ **Student Signature**_____

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Southwest Leadership Academy

Parent, Family and Community Involvement Policy

We believe that for all students to have a successful education experience it requires a partnership that includes the student, teachers, staff, parents and the learning community.

Our involvement includes the following:

- Providing the opportunity for all students to receive a high quality education
- Setting high expectations for all students in both academics and conduct
- Providing curriculum and instruction aligned with the Arizona Academic Standards
- Balancing academic accountability with care and concern
- Providing consistent communication with parents, including returning phone calls and emails in a timely manner
- Requesting parent and student input on school improvement, assessment and programming through surveys, emails, meetings and other appropriate means.
- Delivering a safe and respectful environment for students, staff and faculty
- Participating in high quality, ongoing professional development to assist teachers and other staff members in improving their abilities to deliver high quality instruction.
- Offering Educational services to all eligible students and their families.

Parents' involvement in their students' education are as follows:

- Knowing the school's policies and procedures and supporting them, including those related to discipline, attendance and dress code
- Ensuring that students are here before school begins each day and in attendance for the scheduled school days, as required by state law
- Consistently communicating with teachers and staff regarding academic and other issues relating to the student's education
- Supporting the school regarding accountability through standardized testing by making sure that students are in school on time the day of the test and encouraging students to do their best
- Encouraging students to set academic goals each year and develop a strategy for achieving those goals
- Participating with students on planning for their goals after high school and helping in the implementation of strategies to achieve those goals
- Tracking high school graduation requirements, as well as higher education requirements, with the assistance of appropriate school personnel
- Returning calls or emails from the school as soon as possible
- Volunteering to provide additional resources to further all students' education
- Setting high expectations for students

Student's involvement in the educational process is as follows:

- Setting high expectations for themselves and consistently working toward those expectations
- Arriving at school on time each day
- Attending school in accordance with state law
- Knowing the school's policies and procedures and abiding by them consistently
- Acting in a safe and respectful way to self and others
- Doing their best everyday so teachers and others will have an accurate picture of students' academic ability
- Consistently communicating with teachers and staff regarding issues regarding their education
- Setting goals for after high school graduation, which may include the military or attending a community college, university or technical school and working towards them
- Tracking their progress toward high school graduation requirements with the assistance of appropriate school personnel.

I have read the **Parent, Family, and Community Involvement Policy** and agree to comply with the expectations.

Parent Signature_____ **Student Signature**_____

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Arizona Department of Education
Arizona Residency Documentation Form

Student_____ School _____

School District or Charter Holder _____

Parent/Legal Guardian _____

As the Parent/Legal Guardian of the Student, I attest* that I am a resident of the State of Arizona and submit in support of this attestation a copy of the following document that displays my name and residential address or physical description of the property where the student resides:

_____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
_____ Valid Arizona Address Confidentiality Program authorization card
_____ Real estate deed or mortgage documents
_____ Property tax bill
_____ Residential lease or rental agreement
_____ Water, electric, gas, cable, or phone bill
_____ Bank or credit card statement
_____ W-2 wage statement
_____ Payroll stub
_____ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona
_____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
_____ Temporary on-base billeting facility (for military families)

_____ I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

_____ _____

Signature of Parent/Legal Guardian Date

***For members of the armed services, the provision of verifiable documentation does not serve as a declaration of official residency for income tax or other legal purposes. Armed service members may utilize a temporary on-base billeting facility as the address for proof of residency.**

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The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- Parents or eligible students have the right to request that a school correct records which they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions (34 CFR § 99.31):
    - School officials with legitimate educational interest;
    - Other schools to which a student is transferring;
    - Specified officials for audit or evaluation purposes;
    - Appropriate parties in connection with financial aid to a student;
    - Organizations conducting certain studies for or on behalf of the school;
    - Accrediting organizations;
    - To comply with a judicial order or lawfully issued subpoena;
    - Appropriate officials in cases of health and safety emergencies; and
    - State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose directory information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a PTA bulletin, student handbook, or newspaper article) is left to the discretion of each school.

The Individuals with Disabilities Education Act (IDEA) is a law that makes available a free appropriate public education to eligible children with disabilities throughout the nation and ensures special education and related services to those children. The IDEA governs how states and public agencies provide early intervention, special education, and related services to more than 7.5 million (as of school year 2018-19) eligible infants, toddlers, children, and youth with disabilities.
Infants and toddlers, birth through age 2, with disabilities and their families receive early intervention services under IDEA Part C. Children and youth ages 3 through 21 receive special education and related services under IDEA Part B.

Additionally, the IDEA authorizes:

- Formula grants to states to support special education and related services and early intervention services.

- Discretionary grants to state educational agencies, institutions of higher education, and other nonprofit organizations to support research, demonstrations, technical assistance and dissemination, technology development, personnel preparation and development, and parent-training and -information centers.

Congress reauthorized the IDEA in 2004 and most recently amended the IDEA through Public Law 114-95, the Every Student Succeeds Act, in December 2015.

In the law, Congress states: Disability is a natural part of the human experience and in no way diminishes the right of individuals to participate in or contribute to society. Improving educational results for children with disabilities is an essential element of our national policy of ensuring equality of opportunity, full participation, independent living, and economic self-sufficiency for individuals with disabilities. **Arizona Department of Education/Exceptional Student Services 602-542-4013.**

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McKinney-Vento Act Residency and Educational Rights Information

(questionnaire must be completed for each student)

The Arizona Homeless Education Program is dedicated to ensuring that all children and youth experiencing homelessness have access to the public education to which they are entitled under the federal McKinney-Vento Education of Homeless Children and Youth Assistance Act. ADE works towards this goal by ensuring that Arizona state policies are in compliance with federal law, by providing technical assistance to Arizona's local homeless liaisons, and by providing informational and awareness materials to educators and other interested community members throughout Arizona.

Parent and Family Rights

- Your child can be enrolled in school, even if you do not have required documents such as a birth certificate or shot records.
- Your child may be able to stay at the same school, and you may be able to receive transportation to that school.
- Your child can receive free school breakfast and lunch.

The mission of the Homeless Education Program is to ensure that homeless children and youth have access to a free, appropriate public education, comparable to that provided to the children of any Arizona resident and consistent with Arizona's mandatory school attendance laws.

Subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.) is included in the Every Student Succeeds Act (ESSA) of 2015. The reauthorization requires that children and youths experiencing homelessness are immediately enrolled in school and have educational opportunities equal to those of their non-homeless peers. The statute requires every public school district and charter holder to designate a Homeless Liaison to ensure that homeless students are identified and their needs are being met.

In order to supplement services to these children and youths, the U.S. Department of Education provides funding for state and local activities. These dollars are allocated to the local education agencies through a competitive grant process, based on need and program quality.

According to the U.S. Department of Education, people living in the following situations are considered homeless:

- Doubled up with family or friends due to loss of housing or economic hardship
- Living in motels and hotels for lack of other suitable housing
- Runaway and displaced children and youth – Unaccompanied Youth
- Homes for unwed or expectant mothers for lack of a place to live
- Homeless and domestic violence shelters
- Transitional housing programs
- The streets
- Abandoned buildings
- Public places not meant for housing
- Cars, trailers (does not include mobile homes intended for permanent housing), and campgrounds
- Awaiting foster care
- Migratory children staying in housing not fit for habitation

Please complete the form provided and return to the school office.

Questions may be directed to your school Principal, Guidance Counselor, Social Worker, or Registrar at 602-265-2000.

Silvia Chavez, McKinney-Vento State Coordinator, 602-542-4963 Silvia.Chavez@azed.gov

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McKinney-Vento Residency Form

Student Name _____

Date of Birth _____ **Grade Level** _____

The McKinney-Vento Homeless Assistance Act (Title X, Part C, of the No Child Left Behind Act) defines "homeless" as "individuals who lack a fixed, regular and adequate nighttime residence." This includes children who "are **temporarily** sharing the housing of other persons due to the loss of housing or economic hardship."

☐ *Does not apply; student is not homeless*

Please check *one* of the following statements if your family is experiencing temporary homelessness:

☐ *Living in a shelter, including transitional housing shelters (i.e.Umom New Day Centers, Inc, A New Leaf) awaiting foster care, etc. – Please provide name and address of shelter:*

_____

☐ *Living on the streets, abandoned buildings, in cars, trailers, campgrounds, public places, housing and not fit for habitation- Please provide information regarding area in which student is living:*

_____

☐ *Living in hotels/motels for lack of other suitable housing- Please list name and address of hotel/motel:*

_____

☐ *Doubled-Up;* ***Temporarily*** *living with family or friends due to lack of adequate housing or financial conditions. Please provide address of where student is living:*

_____

Please answer the following if you checked one of the four boxes above:
How long do you expect to be at this address? _____
Are you seeking permanent housing? _____
Date student moved to this address: _____
Is a parent living in the home with the student? _____
If no, with whom is student living? _____ Relationship: _____

The School Social Worker may be in contact with you if clarification or bus transportation is needed.

We have read the information provided and indicated our living circumstances above with regard to the McKinney-Vento Act:

_____ _____
Signature of Parent/Guardian/Unaccompanied Youth *Date*

- - - -