

3330 Monte Villa Parkway, Bothell WA 98021

McKINNEY-VENTO HOMELESS ASSISTANCE ACT INTAKE AND REFERRAL

Send completed form to McKinney-Vento Liaison Ana Foy 425 408 7727 or Fax 425 408 7729

Date:				Student ID#:		
Stud	ent Name:					Date of Birth:
		Last	First	Middle		
Age:		Grade:	School l	Requesting to Attend:		
Nigh	t-time addr	ess:			_City:	Zip:
Pare	nt/Guardia	ın Name:		Email:		
Phor	ne Number:	:		Alternate/Emerge	ncy phon	e:
Whe	re does the	student stay a	t night? (Pleas	e check one box.)		
□ "[Doubled Up"	with another far	mily due to a los	s of housing or economic	hardship;	;
□ A	motel/hote	l;				
□ A	t an emerge	ncy or transition	al shelter;			
		not usually used to transportation state			campsite, pul	blic places, abandoned buildings,
	ouch Surfing	-		0 /		
□ L	iving with so	meone other tha	an your parent			
Are t	there other	children/sibling	gs in the famil	y who are also homele	ss? (name	es, ages, grade/school)
 Please	fill out separate	e form for each stude	ent			
	-					
wna	t district al	a tne student(s) last attend?			
				ermine what services y stance with any of the f		ur child may receive under
□ 1	Γransportatio	on		☐ School Supplies	_	☐ School Fees
	School Meals			Unaccompanied	Youth	
	Other (please	e explain)		☐ Clothing		
_						
_						
Info	rmation ol	otained/filled o	out by:			
Info	rmation ol	otained/filled o	out by:			

Information obtain	ned/filled out by:	
□ Approved □ Denied □ Synergy □ Unaccompanied Youth □ Meals □ Notify Admin/Counselor □ Signature of School District Liaison:	Transportation: □ E-Mail Transportation Department □ ORCA Card □ "In Lieu Of Agreement" & Expense Statement □ Cooperating District	Correspondence: Parent "In Lieu Of Agreement" and Letter Expense Statement forms Re-Verification Letter for new school year Denial Letter and Appeals Disclosure