Insert District Information

Telephone

**Immediate Needs or Services Request for Students in Transition (Homeless)**

If you or your family lives in any of the following situations:

• In a shelter, motel, vehicle, or campground

• On the street

• In an abandoned building, trailer, or other inadequate accommodations, or

• Doubled up with friends or relatives because you cannot find or afford housing

Then, you have certain rights or protections under the McKinney-Vento Homeless Education Assistance Act.

Please list all of your school-aged children currently living with you and attending WCSD#1.

Please indicate if you have any immediate needs or require assistance with any of the following:

 Free Lunch

 Transportation

 School Supplies

 After-school Program (if available)

 Records Assistance

 Information regarding Tutoring or Supplemental Instruction available

 Acquiring Immunizations/Medical Records

 Enrollment/Placement Assistance

I declare that the information here is true and correct and of my own personal knowledge.

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Parent/Guardian Signature Parent/Guardian Print Name Date

Please Return Completed Form Back to the Special Services Office