

ISLAND TREES UFSD

Name of Student _____

Date _____

School _____

Grade _____

TO BE COMPLETED BY PERSONS WHO BELIEVE THEY ARE HOMELESS OR UNACCOMPANIED YOUTH

Homeless Child:

- a) A child or youth who lacks a fixed, regular and adequate nighttime residence, including a child who is:
1) Sharing the housing of other persons due to loss of housing, economic hardship or similar reason;
2) Living in motels, hotels, trailer parks or camping grounds due to the lack of Alternative adequate accommodation;
3) Abandoned in hospitals;
4) Awaiting foster care placement; or
5) A migratory child; or
b) A child or youth who has a primary nighttime location that is:
1) A supervised, publicly or privately operated shelter designed to provide temporary living accommodations; or
2) A public or private place not designed for, or ordinarily used as, a regular Sleeping accommodation for human beings

Unaccompanied Youth: A homeless child for whom no parent or person in parental relation is available or who is living in a residential facility for runaway and homeless youth.

Is enrollment related to homelessness or loss of permanent housing? Yes _____ No _____

Is enrollment related to status as an unaccompanied youth? Yes _____ No _____

(If you checked yes, please fill out the remainder of this section
What are your living arrangements? (Choose from the list above)

Address before child became Homeless: _____

Are you requesting any services, such as transportation, from the District? Yes _____ No _____

If yes, what services are your requesting?

(Note: If you have been placed by Nassau County Department of Social Services in temporary housing outside the school district, the Nassau County Department of Social Services is responsible for your transportation.)

Do you need assistance in obtaining immunizations and/or physical for the child? Yes _____ No _____

Print Name _____

Signature _____

Date _____

HOMELESS CONTACT FORM

Date:
Name: (Parent/Guardian)
Present Address:
Contact Numbers:

Name of Student	Grade	School	First Homeless Date

PARENT CONTACT

Date	Spoke To	Topic

PARENT CONTACT

Date	Spoke To	Topic