

TITLE VII, SUBPART B MCKINNEY-VENTO Homeless Assistance Act, as Reauthorized by TITLE IX, PART A OF ESSA  
CONFIDENTIAL REFERRAL FORM

Louisiana School District \_\_\_\_\_

Date \_\_\_\_\_

Date Not In School \_\_\_\_\_

Student Name \_\_\_\_\_ School \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ SS# or USID \_\_\_\_\_ IEP: \_\_\_ Yes \_\_\_ No

Gender ( M / F ) Race \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_ Grade \_\_\_ Phone Number \_\_\_\_\_

Temporary Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Referring Person \_\_\_\_\_ Position \_\_\_\_\_

Reason for referral: Problems listed below often prevent homeless children and youths from attending school. Please check all areas of concern which apply to the student identified above.

- \_\_\_ School of origin: Yes  No
- \_\_\_ Student lacks a permanent residence
- \_\_\_ Student is unable to pay school fees
- \_\_\_ Immunizations are needed
- \_\_\_ Birth certificate is needed
- \_\_\_ Excessive absences are a problem
- \_\_\_ Lacks academic records and/or documentation
- \_\_\_ Academic problems indicate a need for tutoring
- \_\_\_ School supplies are needed
- \_\_\_ Transportation to school is a problem
- \_\_\_ Student/family needs assistance accessing community resources
- \_\_\_ Behavior indicates a need for mental health counseling
- \_\_\_ School clothes are needed (Sizes: Shirt \_\_\_\_\_ Pants \_\_\_\_\_ Shoes \_\_\_\_\_ Other \_\_\_\_\_)
- \_\_\_ Free lunch form needed
- \_\_\_ Health problems are indicated
- \_\_\_ Need Health Insurance (LA CHIP/Medical Card)
- \_\_\_ Guardianship is a problem
- \_\_\_ IDEA (gifted, talented, disabilities) services needed
- \_\_\_ LEP/ESL services needed
- \_\_\_ Migrant services needed
- \_\_\_ Need SNAP benefits (food stamps)

Check all that apply:

- (1) Sheltered
- (2) Doubled-Up
- (3) Unsheltered/FEMA
- (4) Hotel/Motel

Unaccompanied Youth: Yes  No

- 01 – Mortgage Foreclosure
- 02 - Flooding
- 03 - Hurricane
- 04 - Tropical Storm
- 05 - Tornado
- 06 - Wildfire or Fire
- 07 – Man-made Disaster (Major)
- 99 – Other:  
( i.e., lack of affordable housing, long-term poverty, unemployment or under-employment, lack of affordable health care, mental illness, domestic violence, forced eviction, etc.)

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Children in Home: \_\_\_\_\_

\_\_\_\_\_  
School Personnel Signature

Date

\_\_\_\_\_  
Homeless Liaison Signature

Date

\*LIAISON'S SIGNATURE INDICATES STUDENT(S) MEETS TITLE IX, PART A REQUIREMENTS

Copy Sent to District Homeless Liaison

Copy Placed in Student's Cumulative Record