

SECTION 1—To Be Completed by Parent/Guardian

This is to record that the following child is currently homeless and is eligible to attend the Montgomery County Public Schools.

Name of Parent/guardian _____

Name of Student	Student ID	Date of Birth	Current Grade
_____	_____	____/____/____	_____

Last school attended _____ Last date of attendance ____/____/____

Last permanent address _____

Nighttime/Temporary address _____

Length of time at above address _____ Telephone (home or contact) _____-_____-_____

Check the following condition that describes your child's living situation (which may be outside Montgomery County) as a result of being homeless:

- Temporarily living with family or friends due to loss of housing, economic hardship, or similar reasons
- Living in a motel, hotel, or trailer park generally used by and/or for the housing of homeless families or on camping grounds
- Living in an emergency or transitional shelter and/or awaiting foster care placement
- Living in a place not designed as regular sleeping accommodations, such as a car, park, abandoned building, bus or train station, etc.
- Living with a parent who is a migratory agricultural worker

Please arrange for my child to receive free or reduced-price meals

Requested school (please check one)

- School my child attended prior to becoming homeless _____
- School serving the location where my child is temporarily living _____
- I have received written notice of my rights under the McKinney-Vento Act.

_____/____/____
Signature, Parent/Legal Guardian *Date*

SECTION 2—To Be Completed by School Personnel

School of origin _____ School serving temporary residence _____

Recommended school _____

Recommended by _____
Signature *Title* *Date*

SECTION 3—To Be Completed by Parent/Guardian

I agree with the above recommendation and determination that the recommended school is in my child's best interest.

_____/____/____
Signature, Parent/Legal Guardian *Date*

I disagree with the above recommendation and have been provided with information about how to appeal the decision. My child has the right to be enrolled in the school I have requested as long as my appeal is pending.

_____/____/____
Signature, Parent/Legal Guardian *Date*

If student will be attending the school of origin, please complete MCPS Form 335-77B: *Request for Transportation for Homeless Student*.