

Instructions:

- This document is to assist those experiencing Homelessness in completing forms to request assistance via the Federal McKinney-Vento Act
- Upon completing these forms, please contact the McKinney-Vento Liaison at **516-308-5010**

one per family



Massapequa Public Schools
Excellence In Education

STUDENT RESIDENCY STATEMENT (SRS)

Please read statement on reverse before completing

School: Berner Date: 11/13/12

Student Name (PLEASE PRINT): John Doe Birth date: 3/30/99 Grade: 7

Please list all of YOUR preschool and school-aged children currently living with you (pls use reverse if necessary):

Name: Jane Doe Birth date: 4/14/01 School: Ungua

Name: Sally Doe Birth date: 5/15/04 School: Ungua

1. Do you live in any of these following situations?

- Sharing the housing of other persons due to: (check one)
 - Loss of housing, economic hardship, or a similar reason (example: evicted from home, etc.)
Explain: Hurricane sandy
 - Long-term, cooperative living arrangement to save money or a similar reason
 - Other (please specify): _____
- In a motel, hotel, campground or similar setting due to: (check one)
 - Lack of alternative adequate accommodations, explain: _____
 - A convenient living arrangement or waiting for apartment or house to be ready
 - Other (please specify): _____
- In emergency or transitional shelters such for domestic violence, homelessness or transitional housing through Social Services or other shelter or agency.
- Have a primary nighttime residence that is inadequate or considered a place not designed for or ordinarily used as a regular sleeping accommodation for humans.
- In cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- Awaiting foster care placement
- Other temporary living situation (please specify): _____

1.a. if you checked any box above, please note how long you anticipate living at this location 6 months

2. Check here if the above-noted situations do not apply to you and your family

Current Address: 49 Second Ave, Huntington, NY Phone Number: 516-999-9999

By signing below, I acknowledge that the information provided is accurate and complete at the time this report is given.

Mary Doe
Parent/Guardian/Unaccompanied Youth Signature

11/13/12
Date

School Use

Individual Taking Report _____ Date _____

- Fwd to M-VL for review
- N/A

Student Residency Statement:

- (Mustard-colored)

- One per family

Tells us you are not living at your regular place & for how long (estimate)

- "Current Address" = temporary location

one per student

MASSAPEQUA PUBLIC SCHOOLS EDUCATION PROGRAM FOR HOMELESS STUDENTS

The Massapequa Schools are required by State and Federal law to collect statistics on the number of homeless students enrolled to ensure that an appropriate education is provided. This form should be completed by the parent/guardian/caregiver at the time of enrollment and at the beginning of every school year. **A form should be completed for each child enrolling.** The law defines homelessness as (please check the statement that best describes your current circumstances):

- Temporarily sharing the housing of other persons due to loss of housing or economic hardship
- Temporarily living in motels, hotels, trailer parks, campgrounds, cars, parks, public places, abandoned buildings
- Living in emergency or transitional shelters
- Unaccompanied youth (not in custody of parent or legal guardian)

The information you provide is confidential and will be used for enrollment and State/Federal reporting purposes only. Your child will not be discriminated against based upon the information provided and may qualify for additional services (such as transportation, food service, etc).

Student Name	Date of Birth MM/DD/YY	Gender M/F	School	Grade Level
John Doe	03/30/99	M	Berner	7

Address where you are currently residing:

49 Second Ave. Huntington, NY Zip

Street Address City NY Zip

Mary Doe Mary Doe 1/1/3/12

Print Parent/Guardian/Caregiver Name Signature Date

.....
School Use Only

- Transportation: Parent Contract Public Trans. Bus if Feasible N/A
- Notes:

The following documents are unavailable at the time of enrollment:

___ School Records ___ Birth Certificate

___ Results of recent physical examination ___ Proof of residency

___ Proof of immunizations

Student # _____

School Advocate or Administrator: Based on the above information and a brief interview with this family, I attest that to the best of my knowledge they are eligible for benefits under the McKinney-Vento Act:

Print Advocate or School Administrator Name (required) Title Signature (required) Date

- Copies to: 1. School Data Entry 3. Food Service Office 5. Homeless Student Liaison
2. Transportation Office 4. Student's File 6. Business Office

Education Program for Homeless Students

- (Blue-colored)

- One per student

- Confidential internal form for notification purposes

one per student

STAC Child ID

[Empty box for STAC Child ID]

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
STAC & Special Aids Unit
Room 514, Education Building
Albany, NY 12234

STAC-202

Designation of School District of Attendance for a Homeless Child

Submitted by: Local Dept of Social Services (DSS)

School District of Attendance (PSD)

1. NAME OF CHILD Doe Last Name

2. DATE OF BIRTH 03/30/99 Month Day Year

3. GENDER M F

4. Social Security Number [][][][][][][][][][][][]

5. Racial/Ethnic Category of Child (See definitions on reverse side of the last page.)

American Ind or Alaskan Native Asian or Pacific Isl. Black Hispanic White

6. GRADE LEVEL FOR WHICH PLACEMENT IS SOUGHT 07

7. COMPLETE ADDRESS BEFORE CHILD/FAMILY BECAME HOMELESS

9999 Broadway
Massapequa NY 11758

NYS School District of Attendance Before Becoming Homeless Massapequa

8. COMPLETE ADDRESS OF CURRENT LOCATION

49 Second Ave.
Huntington, NY

Date Child/Family Placed in Temporary Housing 10/31/12 Month Day Year

NYS School District of Current Location Huntington

9. DATE DISTRICT OF ATTENDANCE CHOSEN 11/13/12 Month Day Year

NYS School District of Attendance Massapequa

10. DATE PLACED IN PERMANENT HOUSING [][][][][][][][][][][][]

11. RPP District Previous Host District

One of three districts may be chosen to provide the education component: the school district of attendance before becoming homeless, the school district of current location, or a school district participating in a Regional Placement Plan. This designation may be changed either prior to the end of the first semester of attendance or within 60 days of making this designation, whichever occurs later.

12. Mary Doe NAME OF PARENT OR PERSON IN PARENTAL RELATIONSHIP

576 AREA CODE 999-9999 TELEPHONE NUMBER

13. Mary Doe SIGNATURE OF PERSON IN PARENTAL RELATIONSHIP TO CHILD

11/13/12 DATE

IT HAS BEEN REPORTED TO ME THAT THIS CHILD IS UNDER THE AGE OF 21 YEARS AND IS THEREFORE ELIGIBLE FOR EDUCATIONAL SERVICES. THE CHILD HAS BEEN ADVISED OF HIS/HER RIGHT TO DESIGNATE THE SCHOOL DISTRICT OF ATTENDANCE.

14. PRINT NAME OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE _____ TITLE _____

15. SIGNATURE OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE _____ DATE _____

16. PLACEMENT COUNTY [][] AREA CODE _____ TELEPHONE NUMBER _____

Please read the instructions on the reverse side before completing this form.

RETURN TO New York State Education Department, STAC & Special Aids Unit
Room 514W, EB, Albany, New York 12234

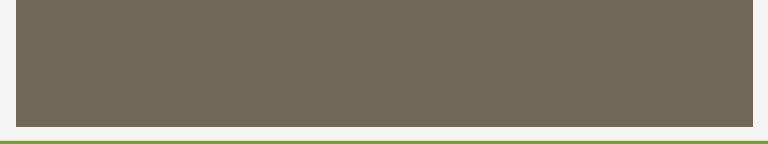
STAC-202 Form

- NY State Ed. Dept. form
- (White-colored)
- One per student

- Complete # 1-3 & 5-9
- #9 is where you choose which district your child will attend
- #10 is completed when you are back at home
- sign at # 12 & 13

What happens now?

- District will review eligibility for MV services. If eligible:
 - Child's home school notified of change of address/contact info
 - NYSED receives copy of STAC-202 form
 - Parent will receive contact:
 - Noting Eligibility determination
 - If eligible, from transportation office re busing
 - If eligible, from food service office re. free lunch



We Need to Know When You Get Back Home, and/or if there are any changes in your housing!

- Contact our District Registrar at 308-5094

Questions?

- **Transportation –** – 308-5065
- **SPED/PPS services –** – 308-5050
- **Counseling/Outreach Services –**
 - YES – 799-3203
 - Counselors at your home school
- **Food Service –** – 308-5745
- **McKinney-Vento Liaison–** – 308-5010