

Welcome to Lakeview Community Schools! Please include all of your children on this form.



MCKINNEY-VENTO ACT



You may qualify for McKinney-Vento Federal Funding. Please fill out this paperwork to see if you qualify for assistance.

Date: _____

Family Information:

Children you are enrolling in Lakeview Community Schools

1. Name: _____ Birthdate: _____ Grade: _____
2. Name: _____ Birthdate: _____ Grade: _____
3. Name: _____ Birthdate: _____ Grade: _____
4. Name: _____ Birthdate: _____ Grade: _____
5. Name: _____ Birthdate: _____ Grade: _____
6. Name: _____ Birthdate: _____ Grade: _____

Children living with you but you are not enrolling.

1. Name: _____ Birthdate: _____ Age: _____
2. Name: _____ Birthdate: _____ Age: _____
3. Name: _____ Birthdate: _____ Age: _____
4. Name: _____ Birthdate: _____ Age: _____

Contact Person: (Parent or Guardian) _____

Phone number (s): _____ or _____ Do you text? Yes or No

E-mail address: _____ Do you check email often? Yes or No

Address where currently living: _____

City: _____ State: MI Zip code: _____

Please check reason for referral:

- Doubled-Up living with another family (Please list the family you are living with(_____))
- Unaccompanied Youth (child living w/out parents)
- Shelter (Temporary living arrangement)
- Foster Care - How long? _____
- Camper, Tent or Car

Please check reason you are living in an alternate location: Check all that apply.

Return this form to Johanna Rentschler/LCS Homeless Liaison/Office at LMS 989-352-7221, ext#2003

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- Eviction
 - Job Loss
 - Loss of Income
 - Displaced-(Reason for being displaced?) Ex: Divorce, Death in family, etc.
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ENROLLED PROGRAMS: CHECK ALL THAT APPLY

- General Education
- Special Education
- Vocational Education (Career Center)
- Alternative Education
- Dual Enrollment
- Pre-K/Preschool/Headstart

Does this child have siblings living in the home not of school age? If yes, please list Name and age of children in home.

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

PLEASE CHECK THE SERVICES YOU WOULD LIKE ASSISTANCE WITH:

- Counseling
- Free meals at school
- Hygiene supplies
- School supplies
- Clothing
- Medical/Vision/Dental Referral
- Tutoring/Education support
- DHS form assistance
- Obtaining records for school enrollment
- Schools of choice Paperwork
- Food Pantry
- Employment
- Financial help/Explain _____
- Parenting/Discipline
- Transportation Issues

HOW WILL THIS STUDENT BE TRANSPORTED TO SCHOOL?

- School Bus
- Parent will transport in vehicle
- Other? _____

POSSIBLE BARRIERS FOR SUCCESS: CHECK ALL THAT APPLY

Welcome to Lakeview Community Schools! Please include all of your children on this form.

- Attendance Issues
- Behavioral issues
- Suspensions
- Past Expulsion
- Needs an Immunization
- Pre-K Fees
- Fees for classes or items need to be purchased

Any other Pertinent Information?