Your child may be eligible for additional educational services through Title X, Part C, Federal McKinney-Vento Assistance Act. Eligibility can be determined by completing this questionnaire. Please complete this form with the school counselor.

1. Where are you and your family currently staying? Check one box.

- Temporarily with another family because we cannot afford or find affordable housing
- With an adult that is not a parent or legal guardian, or alone without an adult
- In a hotel/motel
- In a vehicle of any kind, RV park or campground, abandoned building or substandard housing without running water/electricity
- In an emergency/transitional shelter
- Displaced due to natural disaster
- Other

2. Who do the children/youth live with?

- parent(s) / legal guardian
- relative(s), friend(s) or other adult(s)
- alone with no adult
- an adult who is not the parent or legal guardian

3. Name of school counselor(s): ____________________________

4. Names of children/youth (including pre-school children; age 3 by Sept. 1)

<table>
<thead>
<tr>
<th>Student Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
</tr>
<tr>
<td>M/F</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

5. The undersigned certifies that the information provided above is accurate.

Name of Parent/Guardian/Adult Caring for Student________________________________________________________

Current Address________________________________________________________

Street Address __________________________________ City ______________________ State ____________ Zip ____________

How long will you remain at this address? ________________________________________________________________

Mail is received at (if different than above): ______________________________________________________________

Phone/Pager/Contact # __________________________________________________________

Emergency Contact Name and Phone______________________________________________________________

6. Assistance Needed:

- Transportation to and from school (for non-residents) There is no out-of district transportation on 2 hr late arrivals.
- Meals - lunch
- Breakfast
- School Supplies
- School Clothing
- Tutoring
- Medical/Dental Assistance
- Other: ____________________

--For Office Use Only--

- Approved: ____________ Date ____________
- Input into eSchoolPlus “MV”
- ___Transportation ___Food Services ___CIS
- ___Clothing ___Tutoring ___Medical/Dental
- Other
Puyallup School District
Residency or Unaccompanied Youth Affidavit

This affidavit is intended to address requirements of the McKinney-Vento Act. Your answers will help facilitate the student’s enrollment.

I, ________________________________, am the parent/legal guardian of (student) ____________________________, who is of school age and is seeking admission to (school) __________________________ in the Puyallup School District. Since (date) ____________________ our family has not had a permanent home.

I declare and affirm that the information provided here is true and correct. Should our housing condition change, I will immediately notify the school.

OR

I, ________________________________, am an unaccompanied youth of school age and am independently seeking admission to (school) __________________________ in the Puyallup School District.

I declare and affirm that the information provided here is true and correct. Should my housing condition change, I will immediately notify the school.

OR

If neither applies, please explain:

Signature of Parent/Guardian __________________________ Signature of Unaccompanied Youth __________________________ Staff member that assisted in completing Intake Form __________________________

Date __________________________ Date __________________________ Date __________________________

---School Staff---
Please scan (DO NOT FAX) and send via email to Shirley Beauchamp Beauchsa@puyallup.k12.wa.us
Subject: Last, First M-V Intake
Example: Smith, Susie M-V Intake

Puyallup School District provides equal opportunities in education and employment and does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups.

Students and staff are protected against sexual harassment by anyone in any school program or activity, including on the school campus, on the school bus, or off-campus, such as a school-sponsored field trip.

Questions or complaints of alleged discrimination or harassment may be directed to: ADA/Human Resources Compliance Coordinator: Amie Brandmire ~ (253) 841-8666, brandmah@puyallup.k12.wa.us; Chief Equity and Achievement Officer: Gerald Denman ~ (253) 840-8966, Denmange@puyallup.k12.wa.us; Title IX Coordinator, James Meyerhoff ~ (253) 841-8785, Meyerhja@puyallup.k12.wa.us; or Section 504 Coordinator, Gerald Denman ~ (253) 840-8966, Denmange@puyallup.k12.wa.us; Civil Rights Compliance Coordinator, Gerald Denman ~ (253) 840-8966, Denmange@puyallup.k12.wa.us
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