



Student Referral Questionnaire

School Year
2019 – 2020

The purpose of this form is to identify and support Mesa Public Schools students who may be eligible to receive services in accordance with the McKinney-Vento Act 42 U.S.C. 11435. Eligibility must be reviewed and reevaluated every school year. The information on this form is confidential. If you have questions or concerns, call (480) 472-0291.

STUDENT INFORMATION

Student Name _____ Grade _____ Male Female
Last First Middle
 Birth Date _____ Phone _____ Email Address _____
Month/Day/Year Include Area Code
 Do you have additional children attending Preschool to 12th grade in Mesa Public Schools? Yes No

Please answer these screening questions to determine if the student might qualify for homeless support services:

Question #1

Does the student lack a fixed, regular, or adequate nighttime residence? Yes No

Examples: hotel; shelter; transitional housing; sharing the housing of others due to loss of housing, economic hardship or similar reason; car; park; campsite

Question #2

Does the student live alone or with someone other than his or her biological or adoptive parent or a legal guardian due to loss of housing or economic hardship, incarceration or deportation of parent or legal guardian, or abandonment by parent or legal guardian? Yes No

Please note: A legal guardian is a person appointed by a court to care for a student.

If you answered “**No**” to both questions, you do not need to complete the remainder of this form. Simply sign below to acknowledge you have received Mesa Public Schools’ “Rights of Homeless Students.”

If you answered “**Yes**” to either question, complete the “Current Living Arrangements” section below. The McKinney-Vento Office will contact you to make a final determination regarding eligibility for support services.

CURRENT LIVING ARRANGEMENTS: If you answered “**Yes**” to either Question #1 or Question #2 above, please provide the following information to indicate where the student is currently living. (Check **one** box).

- In a hotel/motel (Name and location of hotel/motel: _____)
- In a shelter or transitional housing program (Name of shelter or program: _____)
- In a place not designated for ordinary sleeping accommodations such as a car, park, or campsite
- In shared housing with another family in their home due to loss of housing, economic hardship, or similar reason
What date did shared housing begin? _____

Name of Parent/Guardian/Caregiver/Host (Circle One): _____

Address: _____ Email _____ Phone: _____

I affirm that all information on this form is accurate, and I have received Mesa Public Schools’ “Rights of Homeless Students.”

Signature of Parent/Guardian/Caregiver/Host: _____ Date: _____

School Personnel:

- Student ID Number: _____ School Name: _____
- Email this form to the McKinney-Vento Office at mckv@mpsaz.org.
- If the student does not live with a biological or adoptive parent or legal court-appointed guardian, the person with whom the student lives must complete a Caregiver & Living Arrangements Affidavit for Homeless or Abandoned Student form JC-R-F(7). Email this completed form to the McKinney-Vento Office at mckv@mpsaz.org.