Grass Lake Community Schools

899 South Union St., Grass Lake 49240 Phone (517) 867-5540 · Fax (517) 522-8195

This questionnaire is intended to address the McKinney-Vento Act under the guidelines of the No Child Left Behind Act of 2001. Your answers will help us determine the supplemental needs of your child. (Complete one form per student.)

Current School:	Grade:
Name of Student:	□ Male □ Female
Birth Date: Age: (Month/Day/Year)	Ethnicity:
Name of Parent(s)/Legal Guardian(s):	
Address:	Phone:_()
Address: House #/ Street City State	Zip
Presently, where is the student living? Please complete form and	d check applicable boxes in either Sections $A G$
ţ,	
Section A	
☐ Choices in Section B do not apply (fixed residence - live in own home, rent, or the same living accomn	nodations for a year or more)
Section B (Other Living Arrangements) Check one box:	(Student's Supplemental Needs)
Section B (Other Living Arrangements) Check one box: ☐ In a Shelter (ex: Jackson Interfaith Shelter)	(Student's Supplemental Needs) ☐ Transportation to and from school
☐ In a Shelter (ex: Jackson Interfaith Shelter)	☐ Transportation to and from school
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) 	☐ Transportation to and from school ☐ Tutoring
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) □ Victim Shelter (ex: Aware Shelter) 	 □ Transportation to and from school □ Tutoring □ Personal Hygiene Items
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) □ Victim Shelter (ex: Aware Shelter) □ In a motel/hotel, or campsite 	 □ Transportation to and from school □ Tutoring □ Personal Hygiene Items □ Clothing
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) □ Victim Shelter (ex: Aware Shelter) □ In a motel/hotel, or campsite □ Doubled-Up (living with another family for less than one year) 	 □ Transportation to and from school □ Tutoring □ Personal Hygiene Items □ Clothing □ School Supplies
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) □ Victim Shelter (ex: Aware Shelter) □ In a motel/hotel, or campsite □ Doubled-Up (living with another family for less than one year) □ Unsheltered (on the street, car, park or abandoned building) 	 □ Transportation to and from school □ Tutoring □ Personal Hygiene Items □ Clothing □ School Supplies □ Counseling
 □ In a Shelter (ex: Jackson Interfaith Shelter) □ Transitional Housing (temporary accommodations to perm. housing) □ Victim Shelter (ex: Aware Shelter) □ In a motel/hotel, or campsite □ Doubled-Up (living with another family for less than one year) □ Unsheltered (on the street, car, park or abandoned building) □ Other: CONTINUE: If you checked a box in Section B, please also complete	 □ Transportation to and from school □ Tutoring □ Personal Hygiene Items □ Clothing □ School Supplies □ Counseling

For any choices selected in **Section B**, this form must be completed and turned in with your registration paperwork or faxed to the **Grass Lake Community Schools' Superintendent's Office at (517) 522-8195** immediately upon receipt. Original forms are kept on file separate from the student's CA-60 for audit purposes during the school year. If you have any questions please contact the Homeless Liaison, Sarah Pennewill at (517) 867-5552.