

AMITYVILLE UNION FREE SCHOOL DISTRICT

To be completed by persons <u>meeting the definition of</u> homeless or unaccompanied youth or <u>who believe</u> <u>they are</u> homeless or unaccompanied youth

Homeless Child:				
(a) a child or youth who lacks a fixed, regular and adequat (1) sharing the housing of other persons due to a (2) living in motels, hotels, trailer parks or campi accommodations; (3) abandoned in hospitals; (4) awaiting foster care placement; or	loss of housing, ecor	nomic hardship	or similar reason	1;
(5) a migratory child; or	•			
(b) a child or youth who has a primary nighttime location to	that is:		•	
(1) a supervised, publicly or privately operated shaccommodations; or	elter designed to pro	ovide temporar	y living	
(2) a public or private place not designed for, or of for human beings;	ordinarily used as, a	regular sleepin	g accommodation	ו
Unaccompanied Youth: a homeless child for whom no pais living in a residential facility for runaway and homeless		rental relation	is avaiIable or wh	10
Is enrollment related to homelessness or loss of permanent		Yes □	No □	
Is enrollment related to status as an unaccompanied youth?		Yes □	No 🛘	
(If you checked yes, please fill out the remainder of this se				
What is the date and school of last attendance?:				
Address before child became Homeless:	and the Dietaint?	Yes □	No 🗆	•
Are you requesting any services, such as transportation, from If yes, what services are you requesting?		169 🗆	140 FI	
(Note: If you have been placed by Suffolk County Department of Social Services in temporary housing outside the school district, the Suffolk County Department of Social Services is responsible for your transportation.) Do you need assistance in obtaining immunizations and/or a physical for the child? Yes No No				
FOR OFFICE	USE ONLY			
Homeless Liaison Signature:	<u>\$</u> .	_ Da	te:	-
Family Received STAC Form:	Yes □	No 🗆		
Family Received Homeless Brochure and Information:	Yes □	No 🗆		