

STAC ID

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
 STAC & Special Aids Unit
 Room 514, Education Building
 Albany, NY 12234

STAC-202 HOMELESS DESIGNATION

Designation of School District of Attendance for a Homeless Child

Submitted by: Local Dept of Social Services (DSS) Designated School District of Attendance (PSD)

PLEASE READ THE INSTRUCTIONS ON THE REVERSE BEFORE COMPLETING THIS FORM

1. NAME OF CHILD <table border="1" style="width: 100%;"> <tr> <td style="height: 20px; text-align: center;">LAST NAME</td> </tr> <tr> <td style="height: 20px; text-align: center;">FIRST NAME</td> </tr> </table>	LAST NAME	FIRST NAME	2. DATE OF BIRTH <table border="1" style="width: 100%;"> <tr> <td style="width: 33%; height: 20px; text-align: center;">MO</td> <td style="width: 33%; height: 20px; text-align: center;">DAY</td> <td style="width: 33%; height: 20px; text-align: center;">YR</td> </tr> </table>	MO	DAY	YR	3. GENDER <table border="1" style="width: 100%;"> <tr> <td style="width: 50%; height: 20px; text-align: center;">M</td> <td style="width: 50%; height: 20px; text-align: center;">F</td> </tr> </table>	M	F
LAST NAME									
FIRST NAME									
MO	DAY	YR							
M	F								
<input type="checkbox"/> M.I.									

5. Racial/Ethnic Category of Child (See definitions on reverse side of last page.)

American Ind or Alaskan Native Asian or Pacific Isl. Black Hispanic White

6. GRADE LEVEL FOR WHICH PLACEMENT IS SOUGHT

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7. COMPLETE ADDRESS BEFORE CHILD/FAMILY BECAME HOMELESS

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7A. NYS SCHOOL DISTRICT OF ATTENDANCE BEFORE BECOMING HOMELESS

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8. COMPLETE ADDRESS OF CURRENT LOCATION	DATE CHILD/FAMILY PLACED IN TEMPORARY HOUSING						
.....	<table border="1" style="width: 100%;"> <tr> <td style="width: 33%; height: 20px; text-align: center;"> </td> <td style="width: 33%; height: 20px; text-align: center;"> </td> <td style="width: 33%; height: 20px; text-align: center;"> </td> </tr> <tr> <td style="text-align: center;">MONTH</td> <td style="text-align: center;">DAY</td> <td style="text-align: center;">YEAR</td> </tr> </table>				MONTH	DAY	YEAR
MONTH	DAY	YEAR					

7B. NYS SCHOOL DISTRICT WHERE LAST ENROLLED

.....

9. DATE DISTRICT OF ATTENDANCE CHOSEN

MONTH	DAY	YEAR

8A. NYS SCHOOL DISTRICT OF CURRENT LOCATION

.....

10. DATE PLACED IN PERMANENT HOUSING

MONTH	DAY	YEAR

9A. NYS DESIGNATED DISTRICT OF ATTENDANCE

.....

One of four school districts may be chosen to provide the education component: the school district of attendance before becoming homeless, the school district where last enrolled, the school district of current location or a school district participating in a Regional Placement Plan. This designation may be changed either prior to the end of the first semester of attendance or within 60 days of making this designation, whichever occurs later.

11. Check the appropriate box if the designated school district of attendance (9A) is different from the district of attendance before becoming homeless (7A) and from the district of current location (8A).

District participating in a Regional Placement Plan OR District where last enrolled (7B) if it is different from the district where last permanently housed (7A) and the district of current location (8A).

12. _____
 NAME OF PARENT OR PERSON IN PARENTAL RELATIONSHIP AREA CODE TELEPHONE NUMBER

13. _____
 SIGNATURE OF PERSON IN PARENTAL RELATIONSHIP TO CHILD DATE
IT HAS BEEN REPORTED TO ME THAT THIS CHILD IS UNDER THE AGE OF 21 YEARS AND IS THEREFORE ELIGIBLE FOR EDUCATIONAL SERVICES. THE CHILD HAS BEEN ADVISED OF HIS/HER RIGHT TO DESIGNATE THE SCHOOL DISTRICT OF ATTENDANCE.

14. _____
 PRINT NAME OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE TITLE

15. _____
 SIGNATURE OF LOCAL DSS OR SCHOOL DISTRICT REPRESENTATIVE DATE

16. PLACEMENT COUNTY _____
Local DSS use only

 AREA CODE TELEPHONE NUMBER

East Syracuse Minoa Central School District Enrollment Form – Residency Questionnaire

Meghan Thomas, Homeless Liaison
(315) 434-3306

Name of Child: _____

Date of Birth: _____

Grade: _____

Who has custody of the child? _____

Who will the child be residing with? _____

The answer below will help the district determine what services you or your child may be able to receive under the McKinney-Vento Act. Students who are protected under the McKinney-Vento Act are entitled to immediate enrollment in school even if they don't have the documents normally needed, such as proof of residency, school records, immunization records, or birth certificate. Student who are protected under the McKinney-Vento Act may also be entitled to free transportation and other services.

Where is the student currently living? (Please check one box.)

- In a shelter
- Transitional Housing
- With another family or other person (sometimes referred to as "doubled up.")
- In a hotel/motel
- Unsheltered (car, parks, campgrounds, temporary trailer, or abandoned buildings)

PRINT NAME of Parent, Guardian or Student (for unaccompanied homeless youth)

SIGNATURE of Parent, Guardian or Student (for unaccompanied homeless youth)

DATE