



VIRGINIA BEACH CITY PUBLIC SCHOOLS
CHARTING THE COURSE

Questionnaire: Student/Family Domicile – 20/21 SY

If you checked “Homeless” on the Registration/Emergency Data Form, please complete this questionnaire to determine eligibility for educational services under the McKinney-Vento Education Act.

Please Print or use electronic version available at:

https://www.vbschools.com/parents/student_registration/homeless_education

Parent Name(s):		Guardian/Caregiver: <i>(if child is living with someone other than parent)</i>	
Parent Current Physical/Mailing Address:		Guardian/Caregiver Current Address:	
Phone Number:		Phone Number:	
Email:		Email:	
1. Please list the names of all <u>children</u> attending K-12 school in Virginia Beach: <i>(DO NOT INCLUDE THE CHILDREN OF THE HOST FAMILY)</i> First Middle Last		Grade	SCHOOL student is attending or where you are registering <i>(Please indicate if student has a 504, IEP, or ISFP)</i>
2. Please list other <u>siblings</u> in home who are either in pre-school or younger, in college or continue list from above: First Middle Last		Age	Preschool, daycare, College or other program

3. Presently, do you and/or your family lack a fixed, regular, and adequate nighttime residence in any of the following situations? Check one box.

- Residing in shelter
 - Agency name: _____ (letter provided ___Y___N)
 - Transitional housing: Agency name: _____
 - No verification available: Agency name: _____
- Residing with someone due to loss of housing or economic hardship or another situation rendering the family homeless
 - Eviction –please attach copy of documentation if available
 - Domestic violence
 - Other (explain) _____
- Residing in a car, park, campground, public space, abandoned building, or substandard housing
- Temporarily Residing in a motel or hotel due to the lack of an adequate alternative
 - Motel/hotel receipt or copy of registration card
 - Identify the name of motel _____
- Other _____
- Experiencing homelessness due to foreclosure?

PLEASE USE PAGE 3 TO EXPLAIN REASONS FOR HOMELESSNESS

4. Unaccompanied Youth: Not in the physical custody of a parent or guardian (due to family homelessness or runaway and not for purposes of school preference).

Student(s) is living with an adult that is not their parent or legal guardian
Student is living alone without a parent or legal guardian
Please explain any extenuating circumstances on page 3.

IF 3 OR 4 DO NOT APPLY TO YOU, PLEASE SEE SCHOOL PERSONNEL FOR OTHER ENROLLMENT OPTIONS.

5. If doubled up, please provide this information:

Host Family Name:	Contact Name:	Phone:
Host Family Address:		
Length of time you plan to stay at this address?		

Any person making a materially false statement regarding residency in a school division shall be guilty of a Class 4 misdemeanor and shall be liable to the school division in which the child was enrolled as a result of such false statements for tuition charges, pursuant to the Code of Virginia § 22.1-5, for the time the student was enrolled in such school division.

The undersigned certifies that according to information provided above, the student(s) listed meets the definition of “Homeless” as stated in McKinney-Vento Homeless Assistance Act, Subtitle VII-B.

Parent/Guardian Name (Print)

(Signature)

Date

Please describe what led to your current housing situation:

Please initial acknowledging the following:

I have received a copy of the Homeless Student Rights (page 5) and the definition of homelessness.

I understand my child will automatically become eligible for the Free Lunch program upon being determined eligible under Project HOPE guidelines.

Please mark other services or resources your child/ren need

We are staying outside of my child's current attendance zone and would like for my child to remain at their current school.

Transportation to and from school needed.

I have received a copy of the Project HOPE – Transportation Procedures and signed the Acknowledgement Form

School supplies or backpack.

Appropriate school clothing, outer wear, and/or shoes.

Assistance with medical needs (immunizations, physicals, vision, etc.).

My child will be involved in extra-curricular activities during this current school year (Club or Sport & Season): _____

Please send completed form to:
Project HOPE Virginia Beach
(757) 263-2300
ProjectHope@vbschools.com

See parent handout on page 5.



**IF YOUR FAMILY LIVES IN ANY OF
THE FOLLOWING SITUATIONS:**

In a shelter



In a motel or campground due to the lack of an alternative adequate accommodation



In a car, park, abandoned building, or bus or train station



Doubled up with other people due to loss of housing or economic hardship

*Your school-age children may qualify for certain rights and protections under the
federal McKinney-Vento Act.*

Your eligible children have the right to:

- Receive a free, appropriate public education.
- Enroll in school immediately, even if lacking documents normally required for enrollment.
- Enroll in school and attend classes while the school gathers needed documents.
- Enroll in the local school; or continue attending their school of origin (the school they attended when permanently housed or the school in which they were last enrolled), if that is your preference and is feasible.
 - * If the school district believes that the school you select is not in the best interest of your children, then the district must provide you with a written explanation of its position and inform you of your right to appeal its decision.
- Receive transportation to and from the school of origin, if you request this.
- Receive educational services comparable to those provided to other students, according to your children's needs.

If you believe your children may be eligible, contact the local liaison to find out what services and supports may be available. There also may be supports available for your preschool-age children.

For additional information please contact:

Project HOPE Virginia Beach
757-263-2300

ProjectHope@vbschools.com