

**TROUP COUNTY SCHOOL SYSTEM**  
**MCKINNEY-VENTO ELIGIBILITY ASSESSMENT**

*The McKinney-Vento program helps to meet school-related needs of students who are staying in a temporary place or in a place that does not meet basic needs due to hardship caused by natural disaster, eviction, foreclosure, domestic violence, and other reasons.*

Please complete this form if you think your child may be eligible for the McKinney-Vento program.  
Let us know if you need immediate help while you are waiting on an eligibility decision.

Student Name: \_\_\_\_\_

School: \_\_\_\_\_ Student ID#: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Current Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

How long at present address? \_\_\_\_\_ How much longer is likely? \_\_\_\_\_

Is the student currently living with a legal parent or guardian? \_\_\_\_\_

If no, please explain: \_\_\_\_\_

Where is the student currently living? Please check the appropriate box and answer the appropriate questions:

☐ In a motel/hotel. What is the reason for the stay? \_\_\_\_\_

☐ In an emergency/temporary shelter. Name of shelter: \_\_\_\_\_

☐ In a place not designed for ordinary sleeping conditions such as a car, park, or campsite

☐ In a home without electricity, water, or other necessities (house, apartment, trailer, etc.).

What necessities are you lacking? \_\_\_\_\_

How long have you been without necessities? \_\_\_\_\_

☐ With more than one family due to loss of housing. Is your name on the lease/deed? \_\_\_\_\_

Do you help pay the rent/house payment? \_\_\_\_\_

☐ Other (Please explain): \_\_\_\_\_

Please check each area in which help is needed:

☐ **Emergency Assistance**

☐ School of Origin

☐ Residency/Records Requirements

☐ Out-of-Zone Transportation

☐ More Information about McKinney-Vento

☐ Free School Meals

☐ Tutoring/Remedial Services

☐ School Supplies

☐ Hygiene Supplies

☐ Information about Community Resources

☐ Counseling

☐ Other Needs: \_\_\_\_\_

Anything else we should know, such as additional information about living circumstances or needs?

*Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the child under false documents subjects the person to liability for tuition or other costs. TEC Sec. 25.002 (3) (d).*

Your Name: \_\_\_\_\_ Circle: Parent/Guardian Unaccompanied Youth Other

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Official: **IMMEDIATELY** fax (706-883-1532) or email a copy of this form to the district M-V liaison; **VERIFY** receipt of form. The school-level M-V contact should keep the original copy.

M-V Liaison's Initials: \_\_\_\_\_ Date Received by the M-V Liaison: \_\_\_\_\_ Form Revised: 8.1.22