

CPSB McKinney-Vento Needs Assessment Form

(Use one form per student)

School: _____ Date of Request: _____

Student Name: _____ Student I.D.#: _____

Male/Female: _____ Grade: _____ Age: _____

*****CHECK BOX AND CIRCLE SIZES OF NEEDED ITEMS*****

CHILDREN'S SIZES

<input type="checkbox"/>	CHILD POLO	2T	3T	XS (4-5)	S (6-8)	M (10-12)	L (14-16)	XL (18-20)	*Polos are Unisex*
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<input type="checkbox"/>	SHORTS PANTS	CHILD	2T	3T	4	5	6	7	8	10	12	14	16	18	20	**Children's Bottoms are Unisex**
		HUSKY	8	10	12	14	16	18	20							

<input type="checkbox"/>	BELT	CHILD	Waist Size: _____ inches	*PE uniforms are under adult sizes*
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<input type="checkbox"/>	JACKET	CHILD	2T	3T	XS	S	M	L	XL
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ADULT SIZES

<input type="checkbox"/>	ADULT POLO	S	M	L	XL	2X	3X	*Polos are Unisex*
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<input type="checkbox"/>	SHORTS PANTS	JUNIOR	0	1/2	3/4	5/6	7/8	9/10	11/12	13/14	15/16	17/18	19/20	21/22
		WOMEN	4	6	8	10	12	14	16	18	20	22	24	

<input type="checkbox"/>	SHORTS PANTS	MEN	29	30	31	32	33	34	36	38	40	42	44	46	48	50	52
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<input type="checkbox"/>	BELT	ADULT	Waist Size: _____ inches
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<input type="checkbox"/>	JACKET	ADULT	S	M	L	XL	2X	3X
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<input type="checkbox"/>	PE UNIFORM	ADULT SIZES	SHIRT	S	M	L	XL	2X	3X
			SHORTS	S	M	L	XL	2X	3X

Hygiene Kit

OTHER

CHECK ITEMS NEEDED	<input type="checkbox"/> Supplies	<input type="checkbox"/> Backpack	<input type="checkbox"/> Kinder Mat	Shoe Size: _____ Other: _____
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Office Use Only – FILLED: Initials _____ Date: _____

Please **Email** this form along with MV Forms A & B Email:
federalprogramsrosteet@cpsb.org