Homeless Student Referral Form for Los Lunas Schools

Today's Date:	Received by:
Person making referral:	Date reviewed:
Referring Organization: Los Lunas Schools Admin.	Assigned to
ELIGIBILITY STATUS:	

CHILD'S NAME	STUDENT ID#	DOB	SCHOOL	GRADE	GENDER

CURRENT HOUSING STATUS
☐ Shelter
☐ Hotel/motel
☐ Doubled up (with legal guardian)
☐ Doubled up (no legal guardian)
☐ Staying with grandparent
☐ Staying with relatives
☐ Staying with friends
☐ Outside/unsheltered
☐ Inadequate accommodations
☐ Home visit date:
☐ Unaccompanied Youth
☐ Runaway
☐ Kicked out of Home
☐ Transitional living program:
☐ current housing
☐ Housed date:

FAMILY INFORMATION Guardian's name and best way to contact, such as phone number and/or email)
Guardian's Primary Language if other than English

☐ Home visit	☐ Backpack
☐ Food box	☐ Uniform
☐ Snack Pack	☐ Pant Size
☐ Hygiene Products	☐ Socks
☐	
☐	
☐	
In Database? ☐ Yes	☐ No

NOTES (Include person spoken to and date of conversation)

Adapted from Albuquerque Public Schools Title 1 Homeless Project 4/1/2020