LSD
LEOPARDS

Lawnside School District

426 East Charleston Avenue
Lawnside, NJ 08045
856-546-2705

McKINNEY-VENTO REGIONAL EDUCATION PROGRAM
FOR STUDENTS IN THE LAWNSIDE SCHOOL DISTRICT

This is to verify that for as long as my child(ren) is/are eligible for Lawnside School District McKinney-Vento Education Program services, I give permission to district staff or representatives to provide supplemental instructional, health and supportive services to my child(ren).

Name	***Gender***	***Date of Birth***	***Local Student I.D. NJ Smart (SID)***	***School***	***Grade***

I am willing to assume full responsibility for my child(ren)'s safety in connection with McKinney Education-funded or related activities.

I also hereby authorize the public or private school district to release to the Lawnside School District McKinney Program all records relating to my child(ren), including academic, health and dental information.

Signature of Parent/Guardian **Date**

Parent's/Guardian's Names: _____

Present Address: _____

Present Phone Number/email address: _____

School District: _____

The McKinney-Vento Program may be able to provide assistance in the following areas. Please check areas of need, if any:

___ Backpack/School Supplies___ Temporary Transportation to/from School

___ Tutoring___ Counseling Referral

___ Advocacy Services___ Declined McKinney-Vento Services