

**St. Clair County Schools
McKinney-Vento Homeless Education
Assistance Improvements Act of 2001**

Homeless Referral Form

Date: _____

Referred by: _____

School: _____

Child's Name: _____

Grade: _____

Homeroom Teacher: _____

Please put a check by each one that applies to this child.

Male _____

Female _____

White _____

Black _____

Asian _____

Hispanic _____

Indian _____

Free lunch _____

Paid lunch _____

LEP _____

Sp. Ed. _____

Other _____

Request/Need _____

Send the referral and needs assessment to Betty Robinson, St. Clair County Homeless Liaison, at FAX # (205) 594-3258. The telephone number is (205) 594-7492 extension 247.