

McKinney-Vento Eligibility Assessment

This assessment is used to gather information to determine eligibility under the McKinney-Vento Homeless Assistance Act. This federal legislation protects the rights of children and youth who **lack a fixed, regular, adequate** nighttime residence, including migrant and unaccompanied youth. It grants immediate enrollment **ONLY** at the school of origin or the attendance boundary zoned school. If a parent self-reports homelessness or is unable to provide residency documentation, this form must be used to determine if McKinney-Vento eligibility is met. If a student has **resided at the same address for more than 2 consecutive years**, excluding hotel/motel, their residence is considered regular; therefore, they are **ineligible** for McKinney-Vento services under that category; however, eligibility may be met due to lacking adequate housing. If there is a dispute, please contact the Homeless Education Liaison for guidance. **Note:** Home visits to verify residence for students claiming McKinney-Vento eligibility are **NOT** permitted.

STUDENT NAME	STUDENT NUMBER	GRADE	DOB	AGE														
SCHOOL NAME	SCHOOL SOCIAL WORKER																	
PARENT/LEGAL GUARDIAN/HOST (Head of Household in which an Unaccompanied Youth resides)																		
CURRENT ADDRESS (If the student is sleeping in a car, what is the address where the car was parked last night?)			How long has the student lived at this address?															
Background Information:																		
<p>1. Did the student experience a loss of housing this school year? ____ Yes ____ No (If “No” is selected, please STOP here.)</p> <p>1a. If yes, what is the date the housing was lost and the address of the housing lost?</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> <td style="border: 1px solid black; width: 80%; height: 25px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Date</td> <td style="text-align: center; font-size: small;">Year</td> <td style="text-align: center; font-size: small;">Address</td> </tr> </table> <p>1b. What led to the loss of housing?</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> <p>2. Did the student recently relocate to Hillsborough County? ____ Yes ____ No</p> <p>If yes, explain the reason for relocation:</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> <p>3. What school did the student attend <u>prior to experiencing a loss of housing</u>?</p> <p>School name:</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> <p>4. Is this student an Unaccompanied Youth? (Not living with a parent or legal guardian) ____ Yes ____ No</p> <p>4a. When did the Unaccompanied Youth begin living at the current address?</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> <td style="border: 1px solid black; width: 10%; height: 25px;"></td> </tr> <tr> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Date</td> <td style="text-align: center; font-size: small;">Year</td> </tr> </table> <p>5. Do you have other school-age children affected by the loss of housing? ____ No ____ Yes (Please inform the school social worker)</p>									Month	Date	Year	Address				Month	Date	Year
Month	Date	Year	Address															
Month	Date	Year																
Eligibility Determination (Office Use Only):																		
Yes ____ Parent must be provided Form B for immediate enrollment and a Homeless Education and Literacy Program (H.E.L.P) Parent Folder. No ____ Parent must be advised of their right to dispute the determination by contacting the H.E.L.P Office at (813) 315-4357.																		
Name of school staff making the determination:				Date:														