## ILLINOIS STATE BOARD OF EDUCATION

Curriculum and Instruction Division 100 North First Street, C-215 Springfield, Illinois 62777-0001

## McKinney-Vento Homeless Education Homeless Affidavit

Student Name: This form is to be used to satisf homeless student.	y, on a temporar	ry basis, di	strict req	uirements for	_ r documentation of residency and/or go	uardianship of a
The questionnaire is intended to help determine services the stu				neless Educa	tion Act 42 U.S.C. 11435. The answe	rs on this form are to
<ol> <li>Is your current address a temporary arrangement?</li> <li>Is this temporary living arrangement due to loss of housing or financial problems?</li> </ol> Yes No No						
If you answered YES to any of	the above quest	ions, pleas	e comple	ete the remai	nder of this form. If you answered NO	, you may stop here.
Please list below the children in	ı your care: (Atta	ch additior	nal sheet	s if necessar	y.)	
NAME OF CHILD	DATE OF BIRTH	SE:	X F	GRADE LEVEL	NAME OF LAST SCHOOL ATTENDED	NAME OF NEW SCHOOL
Where did your child/children s	leep last night?	Check on b	oox only.			
☐ Shelter ☐ With a family of friend due to financial problems						
☐ Motel/Hotel	☐ Unaccompanied youth					
In a place not designated for ordinary sleeping accommodations, such as car, park, or campground.						
Other (please explain	ı in person)					
The undersigned certifies that t Homeless Education Act. See		nes above	meet the	e definition of	"homeless student" as stated in the M	cKinney-Vento
Homeless Education Liaison (please print)				Signature		Date
child(ren)/youth. This might inc	clude the parent( nat homeless chi	s), relative, Idren be pr	shelter ovided a	provider, soc i free, approp	permanently is acting as the caretaker ial worker, older sibling, grandparent, o priate public school education. It states and youth.	or others. The federal

ISBE 83-04H (8/10)