Y.M. & Y.W.H.A. of Williamsburg, Inc.

McKinney - Vento Act

Head Start Reauthorization and Homeless Children Eligibility

| 1. | Child's Name: | | |
|-----|--|--|---|
| 2. | Child's date of Birth: | | |
| 3. | Child's Date of entry into program: | | |
| W | nere is | _(Child's full Name) currently living? (Please check one |) |
| | _ In a shelter | | |
| | With another family or other person | (sometimes referred to as "doubled-up") | |
| | _ In a hotel/motel | | |
| | _ In a car, park, bus, train, or campsit | e | |
| | Other temporary living situation (Pl | ease describe): | |
| | _ In Permanent Housing | | |
| Na | me of Parent print: | Date | |
| Sig | nature of Parent: | Date: | |
| | | | |
| | | hanges during the year, this form must be ted name, signature of parent and date. | |