

**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.