2009-2010 REQUEST FOR ENROLLMENT IN FORT BEND ISD
McKinney-Vento Homeless Education Assistance Act

McKINNEY-VENTO HOMELESS EDUCATION ASSISTANCE ACT: This federal legislation provides children and youth with verified homeless status the right to enroll in any public school district. Information about this legislation is available by visiting http://www.ed.gov/programs/homeless/legislation.html. The district provides information as it pertains to enrollment in Fort Bend ISD and the federal legislation's definition of "homeless" in its document titled: *Questions and Answers about the SCT (Special Circumstances Transfer)*, which is available for review on line at www.fortbendisd.com > Parent Information > Student Transfers or in schools.

ACKNOWLEDGEMENT: I acknowledge that I fulfill the requirements of Homeless as based upon the definition in McKinney-Vento Homeless Education Assistance Act. I understand that it is my right to request a transfer to a school district; however, I acknowledge that campus assignments are APPROVED BY THE DISTRICT. Also, I understand that the district does not provide transportation for this transfer, and I must be responsible for my child's transportation to and from the approved campus.

Based on the above acknowledgement and by signing and submitting this form as instructed, I wish to enroll my child in one of the following FBISD campuses for the 2009-2010 school year: **Briargate (BGE), Colony Bend (CBE), Colony Meadows (CME), Highlands (HE), Pecan Grove (PGE) and Juan Seguin (JSE) Elementary School; Crockett Middle School (CMS) or Hodges Bend Middle School (HBMS); and Dulles High School (DHS).** I understand enrollment at the campus is provisionally provided pending the verification of the homeless status.

INSTRUCTIONS: If you wish to request district enrollment for the 2009-2010 school year based on the Homeless Education Assistance Act, you must complete the information below and submit this form to:

Amanda J Hartley
Title I Coordinator
Fort Bend Independent School District
Administration Building
16431 Lexington Blvd.
Sugar Land, Texas 77479

A written district response to your request for a transfer will be provided to you after receipt of this form. Please be reminded that the district *DOES NOT* provide transportation.

NAME OF STUDENT:_____ GR: _____ ID#_____
Please print: First Middle Last

ZONED DISTRICT: _____ SELECT ONE CAMPUS: **BGE, CBE, CME, HE, PGE, JSE CMS, HBMS or DHS**

NAME OF PARENT/GUARDIAN:_____
Please print: : First Middle Initial Last

CURRENT ADDRESS:_____

CITY:_____ ZIP CODE:_____

CONTACT PHONE NUMBER:(_____)_____ WORK/CELL PHONE:(___)_____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

For Administrative Use ONLY

Homeless Status Verified: _____ **Date:** _____

Status: Approved _____ **Denied:** _____ **Date:** _____

Approved to enroll in _____ **School**

Approval Signature: _____ **Date:** _____