

2023 - 2024 Education Project Referral Form

Please fill out ONE REFERRAL FORM PER FAMILY

Submit online, by email to EPHYContact@washtenawisd.org, or fax to 734-994-8159

WHAT IS THE EDUCATION PROJECT?

The Education Project works to ensure students regularly attend and succeed in school, despite challenges they are experiencing due to homelessness, temporary living situations and/or mental health challenges. The Education Project also assists families who are experiencing attendance issues, by exploring the causes of absenteeism and assisting with resource connection. The Education Project serves every school district and charter school in Washtenaw County with a team made up of school staff, WISD staff, Ozone House staff and community partners. Please fill out this form (with the family if possible) and someone will reach out to them as soon as possible. All information shared is secure and confidential.

Date: _____ Referral Contact & School Building/Agency: _____

Referral Phone: _____ Referral Email: _____

Reason for Completing this form: Unstable Housing Absenteeism Mental Health

Student Name	Date of Birth	Grade	School/District

If family has more than 5 students, please add information to the notes section at the end of this form.

Is Student Unaccompanied?: Yes No

Caregiver Name: _____ Relationship to Student: _____

Caregiver Phone Number: _____ Caregiver Email: _____

If not enrolled, what school/district did the student(s) previously attend?: _____

If not enrolled, what school/district does the student(s) plan to attend?: _____

Does the student need a backpack?: Yes No - If yes, what items are needed in backpack, (e.g., school supplies, toiletries)?: _____

Have one or more students missed more than 15 days of school?: Yes No

Does the student need transportation to school?: Yes No

Are you concerned about your housing?: Yes No

If yes, please complete the Temporary Residence Statement form. If no, thank you for your time and someone will be in contact with you soon to discuss your needs. If you are at risk of losing your housing in the next few weeks, please contact HAWC at 734-961-1999.

Name of Student(s): _____

Name of Caregiver: (write NA if unavailable): _____

1. The student(s) **temporarily stay(s)** in one of the following situations:

- Emergency shelter or transitional housing program
- Motel/hotel
- Shares housing (doubled up or "couch surfing") with family or friends **due to loss of housing, economic hardship or similar reasons** such as family conflict, unhealthy living conditions, unsafe situations, abuse or neglect, parental incarceration or death.
- Substandard housing, campground; public or private place not designed for or ordinarily used as regular sleeping accommodation for humans, including cars, parks, public spaces, abandoned buildings, and bus or train stations; or abandoned in a hospital.
- Another situation that is not fixed, regular or adequate: _____

2. The reason for this living situation is (CHOOSE ONE):

- Unemployment Evicted Inadequate income Fire/Natural Disaster
- Kicked out Family conflict Unsafe conditions Other: _____

3. Since this date: _____, I have lived in/stayed at this **temporary** address:

STREET	CITY	STATE	ZIP CODE
Secondary/Alternative Address:			
STREET	CITY	STATE	ZIP CODE

4. Please **READ**, initial, and sign below:

I declare that the information provided here is true and correct and of my own personal knowledge. I understand that falsifying residency information for the purposes of school enrollment is against Michigan law. Falsifying enrollment information is an offense subject to prosecution. _____

The Education Project staff respects a client's right to privacy. To ensure the best services possible and compliance with federal law and state grant data reporting requirements, I give permission to the Education Project staff to release and exchange information with school staff (i.e., the McKinney-Vento liaison, pupil accounting, school transportation staff, school social workers, counselors, etc.) as needed about the students listed above. I also give permission to the Education Project staff to release and exchange information with community agencies that are assisting the student(s) or are being asked to assist the student(s). This consent is voluntary and subject to revocation at any time. _____

I have received a copy of the student's rights ("Know your Rights") under the McKinney Vento Act, an explanation of those rights and had my questions answered. _____

Signature: _____ Date: _____

Relationship to Student(s): _____

Know Your Rights

This form MUST be given to every eligible family and unaccompanied youth.

The McKinney-Vento Act guarantees that students in temporary living situations have equal access to the same free and appropriate public education provided to others.

McKinney-Vento Services are provided during the school year that the student qualifies. Each year, students must requalify to receive services.

If you live temporarily in a shelter, motel, vehicle, campground, on the street, in abandoned buildings, or doubled up with relatives or friends, you are considered eligible for services under the McKinney-Vento Act. These students have the right to:

- ▶ Continue in their “school of origin” (the school they last attended when permanently housed or the school they last attended), if that is your choice and it is feasible, or attend the neighborhood school where you are currently living.
- ▶ Receive transportation to the school of origin if requested.
- ▶ Immediately enroll and attend classes without providing a permanent address, past school or immunization records, proof of guardianship, etc. You still must fill out enrollment packets.
- ▶ Receive free lunch.
- ▶ Receive equal access to education and support services and if eligible, participate in before– and after-school activities.

When receiving services from the Education Project, you can expect:

- ▶ To be treated with dignity.
- ▶ To be treated as an individual with personalized needs.
- ▶ To have your privacy respected and protected.
- ▶ To be given a form to sign that gives our office permission to provide services and exchange information with schools and relevant community agencies.

Services are enhanced when:

- ▶ Phone calls are returned promptly.
- ▶ We are given advance notice of requests.

It is your responsibility to:

- ▶ Call the school when you’ll be absent.
- ▶ **Call your transportation contact when arranged transportation (i.e., a cab) is not needed.**
- ▶ Call us if you plan to move so we can help with any transition.
- ▶ Call us when your contact information changes.

We want to hear from you if you think your rights have been violated or you have a complaint about Education Project services. Your services WILL NOT be impacted when you lodge a complaint.

- ▶ Please call us and tell us your concern. We will work together on a solution. If your complaint is with a local school, we will follow district procedures to help resolve it.
- ▶ If you feel like your needs weren’t met, you will be put into contact with our Supervising Grant Director, who oversees our office.
- ▶ If we are unable to reach a resolution locally, we will advise how to file a written complaint with the Michigan Department of Education.
- ▶ If a student is determined to be ineligible for McKinney-Vento Services, the school will provide a written explanation of the denial.