



Valley School District No. 070

3030 Huffman Road • Valley, WA 99181 • Ph: (509) 937-2791 • Fax: (509) 937-2691 • www.valleysd.org

McKinney-Vento Homeless Education Program Caregiver Agreement/Authorization

The McKinney-Vento Homeless Assistance Act requires that homeless children, including unaccompanied youth, have access to education and other services for which they are eligible. In some cases, a child or youth who is homeless may not be able to reside with his/her parent or guardian; however, this fact does not nullify the child's/youth's right to receive a free, appropriate public education. A person acting on behalf of a child may facilitate school enrollment by completing this form for a child/youth presenting himself/herself for enrollment while not in the physical custody of a parent or guardian.

Instructions:

- To authorize the enrollment in school of a minor, complete items 1 through 4, sign and submit the form.
- To authorize the enrollment in school and school-related medical care of a minor, complete all items, sign and submit the form.

I am eighteen (18) years of age or older and have agreed to fulfill the role of caregiver for the minor named below.

1. Name: _____ 2. Date of birth: _____

3. My name (adult giving authorization): _____

4. My home address: _____

_____ My phone no.: _____

5. My date of birth: _____ 6. My driver's license no.: _____

or Identification card no.: _____

7. Check one or both:

(For example, if one parent was advised and the other could not be located.)

I have advised the parent(s) or other person(s) having legal custody of the minor as to my intent to authorize medical care and have received no objection.

I am unable to contact the parent(s) or legal guardian(s) at this time to notify them of my intended authorization.

I declare under penalty of perjury under the laws of this state that the foregoing information is true and correct.

Signature: _____ Date: _____

Received by (school staff): _____ Date: _____