

Families in Transition Form

Check ONLY those that apply:		Υ	N
 □ Living in a shelter (code 10) □ Living with friends or relatives temporarily (code 13) □ Living in a hotel or motel (code 14) □ Unsheltered (code 15) □ Transitional Program through Housing Help (code 11) 	Are you living without your parent/g Placed in Foster Care? Date:	uardian? 🗌	
If none of the above apply,		STOP)
This form is to be completed by the responsible party for the student(s) listed below. Please list your contact information including your name, address and phone number(s):			
Name(s) of Responsible Party	<u>Address</u>		
1			
Phone Number(s): Cell: Home:			
Relationship to Student(s):			
☐ Parent(s) ☐ Legal Guardian ☐ Person(s) acting	as a parent in the absence of a pare	ent or guardi	an
☐ Student (not living with parent/guardian)			
Name of Student(s)		0	
	<u>Building</u>	<u>Grade</u>	
1		<u>arade</u>	
1 2		<u>arade</u>	_
1		arade	_
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1			
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Students and families who qualify as a Family In Trans Immediate enrollment while receiving assistance retries Immediate enrollment without a permanent address Students may continue to attend the same school they	sition may receive additional services so eving birth certificates attended prior to the temporary move		
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