**MV Evaluation/Eligibility Determination Form**

**Student Name (Please Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*This form will be completed by District Liaison to evaluate a student’s eligibility under the McKinney-Vento Act.*

A **fixed residence** is one that is **stationary, permanent, and not subject to change**

1. Is this a temporary living arrangement? □Yes □No

2. Did you and your friends/relatives decide to move in together and share a home and expenses for the long term? □Yes □No

3. Where would you go if something happened between you as adults?

4. How long do you expect to be at this address?

A **regular residence** is one that is used on a **regular (i.e. nightly) basis**

1. Do you stay in the same place every night? □Yes □No

2. Do you move around a lot? □Yes □No

An **adequate residence** is one that is sufficient for meeting both the physical and psychological needs typically met in home environments.

1. Are you safe where you are staying?

2. Do you have adequate space for your belongings?

3. Do you share a room/bed with your children?

4. Are your children safe if you are not home?

5. Do you and your children have access to a phone?

6. Is there adequate food in the home?

**Other considerations:** Temporary housing **due to loss of housing, economic hardship or similar reason**.

1. Where did you live previously?

2. What happened to cause you to move?

Did the student/family lose their previous housing due to:

* An eviction or an inability to pay rent or other bills? □Yes □No
* Destruction of or damage to the previous home? □Yes □No
* Conflict, abuse or neglect? □Yes □No
* Unhealthy conditions such as an inadequate physical environment or infestations? □Yes □No
* Drug or alcohol abuse in the home or domestic violence? □Yes □No
* Absence of a parent or guardian due to abandonment, incarceration or another reason? □Yes □No

**\_\_\_\_**  **Approved:**

Complete a *Needs Assessment for Services* form\_\_\_\_\_\_

Schedule/participate in “Best Interest” placement for student \_\_\_\_\_\_\_\_\_

Complete a MV Eligibility Notification letter\_\_\_\_\_\_

**\_\_\_\_ Denied:**

Requested additional information:\_\_\_\_\_\_

Complete a MV Eligibility Notification letter\_\_\_\_\_\_

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District MV Liaison Signature Date