

Appendix E:

State Forms:

State Information Form
Sample Technical Assistance/Barrier Tracking
Form



Information on Homeless Education in the State of _____

Last Revision _____

The most recent child estimate was completed in the state in _____. At the time of the estimate, there were approximately _____ children and youth identified in the state as homeless. The breakdown was:

Age breakdown	Number counted	Number in school	Number regularly attending school
Birth-K (estimated)			
K-5			
6-8			
9-12			
Total			

Responsibilities of Local Homeless Education Liaisons in our state beyond those outlined in federal legislation, are:

[Attach, including the legal reference, when appropriate]

The state has legislation and/or guidelines pertaining to the education of children and youth experiencing homelessness that state:

[Please state and include the reference]

State Coordinator for Homeless Education

Name: _____

Address: _____

Telephone: _____

Fax: _____

E-mail: _____

State homeless education website, if applicable: _____



Technical Assistance and Barrier Tracking

The following pages may be adapted by the state coordinator to track calls for technical assistance and barriers reported by schools, service providers, or families experiencing homelessness. The detail form can be used to document specific events while questions and issues are being resolved. Note that the question regarding how the caller learned about the homeless education program can be valuable in identifying and documenting which awareness initiatives are reaching which audiences. This can be useful in justifying future awareness activities and budgetary expenditures. The summary form can be helpful when sharing such information with supervisors or other audiences responsible for state-level policy (e.g., state board of education). Depending upon the audience, the columns for LEA and Address/Phone may be needed (for internal audiences) or deleted (for external audiences).



Technical Assistance/Barrier Tracking Intake Form

Person completing form: _____ Date: _____

Person calling: _____ Role: _____

Location: _____

Phone number(s): _____

How did the person calling obtain the State Coordinator's contact information:

School district(s): _____

School(s): _____

Age(s)/grade(s) of student(s): _____

Child living with:

- Both parents
- Mother
- Father
- Legal guardian
- Other (specify) _____

Residing:

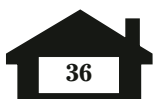
- Shelter
- Doubled-up
- Motel
- Car
- Campground
- Other (specify) _____

Issue:

- Health records
- School records
- Birth certificate
- Social security number
- Guardianship
- School of origin
- Other residency
- Transportation
- Other (specify) _____

Request is primarily: _____ Technical assistance

_____ Barrier issue



Technical Assistance/Barrier Tracking Intake Form (continued)

Initial Details:

Date	Contact	Details of Resolution



Technical Assistance/Barrier Tracking Summary Form

Date	LEA	Address/ Phone	Issue	Resolution Steps

