

ONE STUDENT PER FORM



H.E.L.P. HOMELESS EDUCATION & LITERACY PROJECT

Confidential Intake Form

Please deliver to local HELP Center

East: Toledo Jr. Sr. High 541-336-4357 **West:** Newport Middle 541-574-5824
South: Crestview Heights 541-563-8584 **North:** Taft Elementary 541-996-4878
(If you wish to fax referral, contact the HELP Center for fax number)

Date: _____ School: _____ Intake Person: _____

*Student: _____ DOB: _____ Grade: _____ M/F

Guardian or contact: _____ Phone number: _____

Temporary address: _____

Other children in home (age and grade): _____

Staff Use Only: Please check the areas of concern that apply to the *student identified above:

- Student lacks a permanent residence
- Immunization and/or TB test needed
- Excessive absences are a problem
- Lacks academic records and/or documentation
- Behavior indicates a need for mental health counseling
- Health problems
- Runaway report filed
- Guardianship
- Student/family needs assistance accessing community resources
- Previous school is outside Lincoln County

- Preschool-Counts on State reporting if attending a state funded preschool i.e.; Head Start, E.I., LIFT
- Special Ed or I.E.P Migrant Teen Parent

- Birth certificate _____
- School supplies are needed _____
- Transportation to school needed _____
- School clothes needed. Sizes for: Shirt pants shoes _____
- Graduation cap and gown needed _____
- Academic problems indicate a need for tutoring _____
- Agency referrals _____
- Other H.E.L.P. _____

Comments:

***Unaccompanied Youth-Youth on their own, without supervision by parent or legal guardian; runaway and abandoned youth.