

2025 - 2026 Education Project Referral Form

Please fill out ONE REFERRAL FORM PER FAMILY

Submit online, by email to EPHYContact@washtenawisd.org, or fax to 734-994-8159

WHAT IS THE EDUCATION PROJECT?

- The Education Project works to ensure students regularly attend and succeed in school, despite challenges they are experiencing due to homelessness, temporary living situations and/or mental health challenges.
- Assists families who are experiencing attendance issues, by exploring the causes and assisting with resource connection.
- Serves every school district and charter school in Washtenaw County. Focused on helping to remove barriers to full school participation. Unfortunately, this does not include direct housing or hotel support.

Please fill out this form (with the family if possible) and someone will reach out to them as soon as possible. All information shared is secure and confidential.

Reason for Completing this form: ☐ Unstable Housing ☐ Chronic Absenteeism (15 days or more missed)

Date: _____ Caregiver Name: _____ Relationship to Student: _____

Caregiver Phone Number: _____ Caregiver Email: _____

Referral School/Agency Contact Name, Phone, & Email: _____

Name & Phone Number for person completing form (if different from named above): _____

Student Name	Gender	Date of Birth	Grade	School/District

If family has more than 5 students, please add information to the notes section at the end of this form.

Do you have a child aged 0-5 that is not enrolled in an early childhood program? ___ Yes ___ No

Does the student need transportation to school? ___ Yes ___ No

Is student unaccompanied (not in physical custody of parent or guardian)? ___ Yes ___ No

If not enrolled, what school/district did the student(s) previously attend? _____

If not enrolled, what school/district does the student(s) plan to attend? _____

Does the student need a backpack with school supplies? ___ Yes ___ No

Does the student need toiletries? ___ Yes ___ No Does the student need products for textured hair? ___ Yes ___ No

Does the student need feminine hygiene products? **Please select type:** ___ Pads ___ Tampons ___ Both

Does the student need socks? ___ Yes ___ No **Sizes (required):** _____

Does the student need underwear? ___ Yes ___ No **Sizes (required):** _____

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Does the student need a winter coat? ☐ Yes ☐ No **Sizes (required):** _____

Thrift Store Voucher Request? ☐ Yes ☐ No **Please Select One:** ☐ Ypsilanti or ☐ Ann Arbor

Additional Information:

- Requested supplies will be sent to the school for the student to bring home unless other arrangements are made.
- Education Project staff are available to discuss additional school and community resources further with families. If you would like to speak with staff please call us at (734) 994-8100 ext.1518 or email ephycontact@washtenawisd.org.
- **If you are concerned with housing, please complete the Temporary Residence Statement form.** If no, thank you for your time and someone will be in contact with you soon to discuss your needs. If you are at risk of losing your housing in the next few weeks, please contact HAWC at 734-961-1999.

Please use the space below to record any additional information that might be helpful.

Temporary Residence Statement Form

Name of Student(s): _____

Name of Caregiver: (write NA if unavailable): _____

1. The student(s) temporarily stay(s) in one of the following situations:

- ☐ Emergency shelter or transitional housing program
- ☐ Motel/hotel
- ☐ Shares housing (doubled up or "couch surfing") with family or friends due to loss of housing, economic hardship or similar reasons such as family conflict, unhealthy living conditions, unsafe situations, abuse or neglect, parental incarceration or death.
- ☐ Substandard housing, campground; public or private place not designed for or ordinarily used as regular sleeping accommodation for humans, including cars, parks, public spaces, abandoned buildings, and bus or train stations; or abandoned in a hospital.
- ☐ Another situation that is not fixed, regular or adequate: _____

2. The reason for this living situation is (CHOOSE ONE):

- ☐ Unemployment ☐ Evicted ☐ Inadequate Income ☐ Fire/Natural Disaster
- ☐ Kicked Out ☐ Family Conflict ☐ Unsafe Conditions ☐ Other: _____

Since this date: _____, I have lived in/stayed at this temporary address:

_____	_____	_____	_____
STREET	CITY	STATE	ZIP CODE

Secondary/Alternative Address:

_____	_____	_____	_____
STREET	CITY	STATE	ZIP CODE

3. Please READ, initial, and sign below:

I declare that the information provided here is true and correct and of my own personal knowledge. I understand that falsifying residency information for the purposes of school enrollment is against Michigan law. Falsifying enrollment information is an offense subject to prosecution. _____

The Education Project staff respects a client's right to privacy. To ensure the best services possible and compliance with federal law and state grant data reporting requirements, I give permission to the Education Project staff to release and exchange information with school staff (i.e., the McKinney-Vento liaison, pupil accounting, school transportation staff, school social workers, counselors, etc.) as needed about the students listed above. I also give permission to the Education Project staff to release and exchange information with community agencies that are assisting the student(s) or are being asked to assist the student(s). This consent is voluntary and subject to revocation at any time. _____

I have received a copy of the student's rights ("Know your Rights") under the McKinney Vento Act, an explanation of those rights and had my questions answered. _____

Signature: _____ Date: _____

Relationship to Student(s): _____

Know Your Rights

This form MUST be given to every eligible family and unaccompanied youth.

The McKinney-Vento Act guarantees that students in temporary living situations have equal access to the same free and appropriate public education provided to others.

McKinney-Vento Services are provided during the school year that the student qualifies. Each year, students must requalify to receive services.

If you live temporarily in a shelter, motel, vehicle, campground, on the street, in abandoned buildings, or doubled up with relatives or friends, you are considered eligible for services under the McKinney-Vento Act. These students have the right to:

- ▶ Continue in their “school of origin” (the school they last attended when permanently housed or the school they last attended), if that is your choice and it is feasible, or attend the neighborhood school where you are currently living.
- ▶ Receive transportation to the school of origin if requested.
- ▶ Immediately enroll and attend classes without providing a permanent address, past school or immunization records, proof of guardianship, etc. You still must fill out enrollment packets.
- ▶ Receive free lunch.
- ▶ Receive equal access to education and support services and if eligible, participate in before– and after-school activities.

When receiving services from the Education Project, you can expect:

- ▶ To be treated with dignity.
- ▶ To be treated as an individual with personalized needs.
- ▶ To have your privacy respected and protected.
- ▶ To be given a form to sign that gives our office permission to provide services and exchange information with schools and relevant community agencies.

Services are enhanced when:

- ▶ Phone calls are returned promptly.
- ▶ We are given advance notice of requests.

It is your responsibility to:

- ▶ Call the school when you’ll be absent.
- ▶ **Call your transportation contact when arranged transportation (i.e., a cab) is not needed.**
- ▶ Call us if you plan to move so we can help with any transition.
- ▶ Call us when your contact information changes.

We want to hear from you if you think your rights have been violated or you have a complaint about Education Project services. Your services WILL NOT be impacted when you lodge a complaint.

- ▶ Please call us and tell us your concern. We will work together on a solution. If your complaint is with a local school, we will follow district procedures to help resolve it.
- ▶ If you feel like your needs weren’t met, you will be put into contact with our Supervising Grant Director, who oversees our office.
- ▶ If we are unable to reach a resolution locally, we will advise how to file a written complaint with the Michigan Department of Education.
- ▶ If a student is determined to be ineligible for McKinney-Vento Services, the school will provide a written explanation of the denial.