

Bellingham School District - Families In Transition Intake Form

Date: _____ Referral By: _____ Agency / School: _____

Parent / Guardian: _____

Currently Residing at: _____

Phone Number: _____ Message Number: _____

Student Name	School	Gender	Grade Level	ID #

Circle all that apply

Current Housing: Shelter Hotel/Motel Relative/Friend Car Campsite Transitional
 Unaccompanied Foster Care Rent/Own Other _____

Receiving Free Lunch: Yes No

Current IEP: Yes No

Requesting School Supplies: Yes No

Transportation:
 Requesting Transportation Yes No
Currently using:
 Regular School Bus Yes No
 Walking/Riding City Bus Yes No
 Personal Vehicle Yes No

Comments:

Fax this form to:

Patty Hoff
 BSD – RTL / Homeless Support Coordinator
 Confidential Phone Line: 360-676-6524
 Fax #: 360-647-6898

Roxana Parise
 BSD – RTL / Homeless Support Coordinator
 Confidential Phone Line: 360-676-6523
 Fax #: 360-647-6898

Parents/Student/Guardian – Please be assured that the information on this form will be kept completely confidential. All student information is protected under the Family Education Rights and Privacy Act of 1974, and can only be released or shared with those individuals/agencies with written consent from the student (if 18 years or older) or by the parent/guardian of the student(s).