McKinney-Vento Homeless Education of Children and Youth Program School District Monitoring Document

District Name:		School Name:	
Authorized Representative:		Title:	Email:
Address:		City, State, Zi	ip Code:
Phone:	Fax:	Liaison:	
Liaison address:		Liaison Email	Liaison Phone:

The Illinois State Board of Education is responsible for the administration and supervision of all McKinney-Vento programs, whether or not district receives funds under Subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act. The purpose of this assessment is to monitor regulatory compliance of educational services to homeless children and youth in the district/service area.

REGULATORY COMPLIANCE NCLB (2001) Title X, Part C: McKinney-Vento Homeless Assistance Act, Title VII, Subtitle B	Comments/Details	Compl Stat	
Liaison		YES	NO
1. Do you have a trained district homeless liaison?			
2. Date of last training attended. (must be in the last 3 years)			
3. Name of last training attended. Provide evidence of completion or agenda for documentation.			
Liaison Duties			
1. Are homeless students enrolled immediately?			
2. Explain how you go about enrolling students.			
3. Explain how you determine the services a student needs.			
4. Are parents notified of their rights due to their eligibility? Provide copy of parent letter.			
5. Are posters and brochures displayed in all offices where families can see them?			

6. Have you provided professional development for any of your staff? How? Provide sign in sheets, agendas, or copies			
of email or handouts for the last three years. Must be done annually.			
REGULATORY COMPLIANCE NCLB (2001) Title X, Part C: McKinney-Vento Homeless Assistance Act, Title VII, Subtitle B	Comments/Details	Compliance Status	
Identification and Reporting		YES	NO
1. Who enters data into the Student Information System (SIS)?			
2. Is it entered monthly, weekly, as enrolled?			
3. How do you check to ensure accuracy?			
4. Have you or the data entry person received training from ISBE?			
Student Rights: Homeless children and youth are		YES	NO
allowed to:			
1. Enroll immediately			
2. Enroll without all necessary documents			
3. Enroll in Free Lunch program			
4. Have all allowable fees waived			
5. Assistance offered to obtain necessary records			
6. Attend school of origin			
Transportation: In district or out of district		YES	NO
1. Do you have any homeless students for which you are			
providing transportation to another school district?2. What methods of transportation are you providing your			
homeless students? (In district and out)			

Dispute Resolution		YES	NO
1. Have you had a Dispute Resolution in your district?			
2. Are homeless students enrolled in school pending outcome of the dispute?			
REGULATORY COMPLIANCE NCLB (2001) Title X, Part C: McKinney-Vento Homeless Assistance Act, Title VII, Subtitle B	Comments/Details	Comp Sta	liance tus
Policies and Procedures	Please review your enrollment documents and board policies to ensure there are no barriers for homeless students. Documents should allow for easy identification. Please provide copies of these documents.	YES	NO
1. Included in school board policy?			
2. Included in in person and online enrollment documents?			
3. Included in student and staff handbook, etc?			
Title I: Part A	Please provide copies of these documents.		
1. How much is your set-aside for homeless students?			
2. How much have you used this school year?			
3. What have you used the set-aside money for?			
Coordination with Community: List agencies district works closely with.		YES	NO
Website has the following: homeless liaison information that is easily located, is searchable, current liaison contact			
information, homeless definition & parents' rights.			<u>.</u>
Current SIS Numbers	Comments:		
K-12: Preschool:			

I certify that I have been given a copy of the monitoring visit and agree with the findings:

Regional Liaison	PRINT	Signature of Regional Liaison	Date
Name of attendee	PRINT	Signature of attendee	Date
Name of attendee	PRINT	Signature of attendee	Date
Name of attendee	PRINT	Signature of attendee	Date
_ Area 5 McKinney-Vento Program Director	PRINT	Signature of Program Director	Date