

Parent Certification Form for Displaced Students

This document is intended to both identify student(s) who have been displaced due to recent weather events and serve as acknowledgement of enrollment in a new school by the parent or legal guardian of the student. Parents must still complete the new school's enrollment procedures to the extent possible.

Name of Natural Disaster: _____

Entering School: _____

Student Information

Student Name: _____

Student Date of Birth: _____ 2019-2020 Grade: _____

Student *would have otherwise* attended the following school for the 2019-2020 school year:

Name of the school: _____

Address of the school (county/city and state): _____

Has the student previously been enrolled in the school above? (Y/N) _____

Certification

As the parent or legal guardian of the student above, I acknowledge that I was treated fairly when seeking enrollment at my child's new school, and that I was made aware of the Mississippi Department of Education's State Homeless Coordinator (601-359-3499) for further assistance, if needed.

I certify the information provided on this document is true, correct and of my own personal knowledge.

Signature: _____ Printed Name: _____ Date: _____

Address/Current Location: _____

Telephone: (_____) _____ Alternative Telephone (_____) _____

For Office Use Only

Information Verified by:

(print): _____ (signature) _____ Date: _____