

**Office of Student Services**

*Supporting students, families, and schools*

**Children in Transition**

**McKinney-Vento Grant**

**Item Request Form**

**2016-2017**

|  |
| --- |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| School : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ |
| Advocate Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Student Name | ID # | School | Item | Amount | CIT  Student Y/N | Infinite Campus  Y/N | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | | Total: |  |  |  |  |  |  | |
|  |
| Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approved by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \*\*\* Final date for grant requests is:     |  | | --- | |  | |