



**DEKALB COUNTY SCHOOL DISTRICT  
EDUCATION OF HOMELESS CHILDREN AND YOUTH**

**UNACCOMPANIED HOMELESS YOUTH  
CAREGIVER'S AUTHORIZATION FORM**

*This form is intended to address the McKinney-Vento Homeless Education Assistance Act requirement that homeless children are to have comparable education services. In some cases, a youth who is homeless may not be able to reside with his/her parent or legal guardian, and may reside with a caring adult.*

**Instructions: Complete and sign this form as the acting adult caregiver in lieu of parent/ legal guardian.**

The minor named below lives in my home, and I am 18 years of age or older.

1. Name of student: \_\_\_\_\_
2. Student's Date of Birth: \_\_\_\_\_
3. Name of Authorized Adult Caregiver: \_\_\_\_\_
4. Caregiver's Date of Birth: \_\_\_\_\_
5. List all phone numbers (cell, home, work): \_\_\_\_\_
6. My home address: \_\_\_\_\_

7. Check one or both (for example, if one parent was advised and the other could not be located):

☐ I have advised the parent(s) or other person(s) having legal custody of the minor of my intent to authorize medical care and have received no objection.

☐ I am unable to contact the parent(s) or legal guardian(s) at this time to notify them of my intended authorization.

8. Emergency Contact: \_\_\_\_\_

\_\_\_\_\_  
Authorized Caregiver

\_\_\_\_\_  
Date

\_\_\_\_\_  
School Personnel (*Principal or Designee*)

\_\_\_\_\_  
Date

*The DeKalb County School District does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, marital status, or sexual orientation in any of its employment practices, educational programs, services or activities. For additional information about nondiscrimination provisions, please contact Student Support & Interventions located at 1701 Mountain Industrial Boulevard, Stone Mountain, GA 30083. Phone number 678-676-1200.*