

SCHOOL YEAR
2010-11

New York State Education Department
STAC, Special Aids and Medicaid Unit
Request for Commissioner's Reimbursement Approval for Students in Temporary Housing

STAC-4

STAC ID: _____ Student Name (Last, First) _____ Birth Date _____

Designated District of Attendance _____

Non-Disabled

District Before Becoming Homeless _____

Primary Disability:

- | | |
|--|--|
| <input type="checkbox"/> Emotional Disturbance | <input type="checkbox"/> Visual Impairment including Blindness |
| <input type="checkbox"/> Learning Disability | <input type="checkbox"/> Orthopedic Impairment |
| <input type="checkbox"/> Intellectual Disability | <input type="checkbox"/> Other Health Impairment |
| <input type="checkbox"/> Deafness | <input type="checkbox"/> Multiple Disabilities |
| <input type="checkbox"/> Hearing Impairment | <input type="checkbox"/> Deaf/ Blindness |
| <input type="checkbox"/> Speech or Language Impairment | <input type="checkbox"/> Traumatic Brain Injury |
| | <input type="checkbox"/> Autism |

Provider Name: _____

If BOCES Program, provide rate \$ _____

Grade:

1/2 Day Kindergarten Full Day K - 6 Grade 7-12

Intensity of Special Education:

- 60% of Day
 20% of Day
 Consultant Teacher
 Non-Disabled

Dates Served From _____ through _____

Date of Eligibility: _____

The above listed Homeless Child (Placed in Temporary Housing) has been placed in an education program funded under Chapter 348 of the Laws of 1998 amending the Education Law. I certify that the child herein named is being provided the educational services indicated, and, if such child is designated as having a disability, the placement is in accordance with applicable Statutes and Regulations.

Signature: _____ Date _____
(Superintendent of Schools)

Name of Person Completing This Form: _____

Title: _____ Telephone: _____

Facsimile: _____ E-mail: _____

Return form to: New York State Education Department
STAC, Special Aids and Medicaid Unit
89 Washington Avenue - Room 514 EB
Albany, NY 12234

Student did not attend as a Homeless Child during the 10-11 school year.