



Brownsville Independent School District Homeless Youth Connection Project

COVID-19 DISTRICT SUPPORT

Have any of your students lost their housing due to the Coronavirus Pandemic?

Students can still enroll and attend school.

Students can still be identified as homeless/unaccompanied during this virtual education transition due to COVID-19. If the students meet the status of homeless or unaccompanied youth, we will assist you with the Immediate Enrollment Form for your campus to process the student's registration.



“The intention of the McKinney-Vento Act is to facilitate enrollment, attendance, and success in education for homeless students.”



The McKinney-Vento Act defines homeless children and youth as,

- Individuals who lack a “fixed, regular, and adequate nighttime residence”;
- Includes children and youths
 - who are sharing the housing of other persons due to loss of housing, economic hardship, or similar reason;
 - living in motels, hotels, trailer parks, or camping grounds;
 - living in emergency or transitional shelters;
 - living in cars, parks, public spaces, abandoned buildings, substandard housing, bus/train stations, or similar settings;
 - Migratory children that are living in such circumstances.
 - Or with friends or family because you are a runaway or unaccompanied youth



If they live in one of the previous situations, they do not need to provide:

- proof of residency;
- immunization records or a TB skin test result;
- birth certificate;
- school records; or
- legal guardianship documents

to enroll in school.



McKinney-Vento guarantees students may ...

- continue to attend the school in which they were last enrolled, even if they have moved away from that school's attendance zone or district;
- receive transportation from their current residence back to their school of origin;
- participate fully in all school activities and programs for which they are eligible;
and
- contact the Homeless Liaison to resolve any disputes that arise during the enrollment process.



How we can help ...

- Student Immediate Enrollment
- School of Origin
- Referrals to counseling services
- Referrals to community agencies



How you can help ...


- Student Residency Questionnaire
- Referrals to our program (Intake Form)
- Referrals to counseling services in our community



Forms



Student Residency Questionnaire



BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
Student Residency Questionnaire
2019-2020

Dr. Rosal Chaires
Superintendent of Schools

The information on this form is required to meet the law known as the McKinney-Vento Act 42 U.S.C.11434a(2), which is also known as the Title IX, Part A, of the Every Student Succeeds Act. The answers you give will help the school determine the services the student may be eligible to receive. Presenting a false record or falsifying records is an offense under Section 37.10, Penal code, and enrollment of the child under false documents subjects the parent to liability for tuition or other costs. TEC Sec. 25.0002(3),(4).

Name of Student: _____ Gender: Male Female
Last First Middle

Birth Date: _____ Grade: _____ Student ID #: _____
Month Day Year

Check the box that best describes with whom the student resides. (Please Note: Legal guardianship may be granted only by a court; students living on their own or with friends or relatives who do not have legal guardianship are allowed to enroll in and attend school. The school cannot require proof of guardianship for enrollment or continued attendance.)

Parent Legal Guardian(s)
 Caregiver(s) who are not legal guardian(s) Other _____
(Examples: friends, relatives, parents to friends, etc.)

Name of person with whom student resides: _____
 Address: _____ City: _____ Zip: _____
 Home Phone #: _____ Cell Phone #: _____ Other Emergency #: _____
 Length of Time at Present Address: _____ Length of Time at Previous Address: _____
 Name of school where student is enrolled or attempting to enroll: _____
 Last District Attended: _____ Last School Attended: _____

Please check only one box that best describes where the student is presently living:

In my own home or apartment, in Section 8 housing or in military housing with parent(s), legal guardian(s), or caregiver(s) (If you checked this box, check one or both of the boxes below, if applicable) (CODE=N)
 My home has no electricity. (CODE=L) My home has no running water. (CODE=L)

In the home of a friend or relative because I lost my housing. (Examples: fire, flood, lost job, divorce, domestic violence, kicked out by parents, parent in military and was deployed, parent(s) in jail, etc.) (CODE=D)

In a shelter because I do not have permanent housing. (Examples: living in a family shelter, domestic violence shelter, children/youth shelter, FEMA housing) (CODE=S)

In transitional housing. (Housing that is available for a specific length of time only and is partly or completely paid for by a church, a nonprofit organization, or another organization.) (CODE=S)

In a hotel or motel. (Examples: Because of economic hardship, eviction, cannot get deposits for permanent home, flood, fire, hurricane, etc.) (CODE=H)

In a tent, car, van, abandoned building, on the streets, at a campground, in the park or other unsheltered location. (CODE=L)

None of the above. Briefly describe your living situation: _____

Name of Children	Grade Level	School	District

Signature of Parent/Legal Guardian/Caregiver/Unaccompanied Student _____ Date _____


For School Use Only
 I certify the above named student qualifies for the Child Nutrition Program under the provision of the McKinney-Vento Act.

 McKinney-Vento Liaison Signature Date

BISD does not discriminate on the basis of race, color, national origin, sex, religion, age, disability or genetic information in employment or provision of services, programs or activities.
 BISD no discrimina a base de raza, color, origen nacional, sexo, religión, edad, discapacidad e información genética en el empleo o en la provisión de servicios, programas e actividades.

RFA BISCR-10 (Single-LEA Application)
 H2019-20(1)

English



BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
Cuestionario Sobre la Residencia del Estudiante
2019-2020

Dr. Rosal Chaires
Superintendente de Escuelas

La información en este formulario se requiere para cumplir con la ley conocida como la Ley McKinney-Vento 42 U.S.C.11434a(2), que también se conoce como el Título IX, Parte A, de la ley Cada Estudiante Triunfa, (ESSA, por sus siglas en inglés). Las respuestas que proporcione ayudarán a la escuela a determinar los servicios que el estudiante puede ser elegible para recibir. La presentación de información falsa o la falsificación de documentos es un delito bajo la Sección 37.10 del Código Penal. Una persona que inscriba a un niño con documentos falsos será sujeto a pagar el costo de la matrícula máxima de acuerdo a la sección 25.032 o la cantidad presupuestada para el estudiante, la que resulte mayor. TEC Sec. 25.0002(3),(4).

Nombre del Estudiante: _____ Sexo: Masculino Femenino
Apellido Nombre Segundo Nombre

Fecha de Nacimiento: _____ Grado: _____ No. de identificación del estudiante #: _____
Mes Día Año

Marque la casilla que mejor describa con quién reside el estudiante. (Nota: La custodia legal solo podrá concederse por un tribunal, los estudiantes que vivan solos o con amigos o familiares que no tienen la custodia legal se les permite inscribirse y asistir a la escuela. La escuela no puede requerir prueba de custodia para la inscripción o la continuación de asistencia regular a la escuela.)

Padre(s) de familia Guardián(es) legal(es)
 Proveedor de cuidado que no sea el guardián legal Otro _____
(Por ejemplo: amigos, parientes, padres de amigos, etc.)

Nombre de la persona con quien vive el estudiante: _____
 Dirección: _____ Ciudad: _____ Código Postal: _____
 Telefonos: Casa: _____ Celular: _____ Urgencias: _____
 Tiempo de vivir en esta dirección: _____ Tiempo de vivir en la dirección previa: _____
 Escuela donde está inscrito el estudiante o donde está intentando inscribirse: _____
 Última asistencia del estudiante: Distrito Escolar: _____ Escuela: _____

Favor de marcar únicamente la casilla que mejor describa donde el estudiante está viviendo en la actualidad:

En mi casa o apartamento, habitación bajo asistencia de Sección 8, en un complejo militar con mis padres, guardián(es) legal(es), o con un proveedor de cuidado. (Si marcó esta casilla, marque una o ambas de las casillas de abajo, si es aplicable) (CODE=N)
 Mi casa no tiene electricidad. (CODE=L) Mi casa no tiene agua corriente. (CODE=L)

En la casa de un amigo o pariente, peropeo perdí mi vivienda. (Por ejemplo: incendio, inundación, pérdida de trabajo, divorcio, violencia doméstica, echado de la casa por los padres, padre es militar y ha sido enviado fuera del país, padre(s) en la cárcel, etc.) (CODE=D)

En un albergue, porque no tengo ninguna vivienda permanente. (Por ejemplo: viviendo en un albergue familiar, albergues para víctimas de violencia doméstica, albergue infantil/juvenil, viviendas FEMA) (CODE=S)

En una habitación de transición. (Por ejemplo: vivienda provista solamente por un periodo de tiempo específico, pagada parcialmente o de manera completa por una iglesia u otra organización de asistencia al público) (CODE=S)

En un hotel o motel. (Por ejemplo: a causa de problemas económicos, desalojo, no puede obtener depósitos requeridos para instalarse en un apartamento o casa, inundación, incendio, huracán, etc.) (CODE=H)

En una tienda, de campaña, auto o camión, edificio abandonado, en la calle, en un parque de campamento, en un parque público, o en cualquier lugar que acualmente no se considere una habitación. (CODE=L)

Ninguno de los anteriores describe el tipo de vivienda donde reside. Describa brevemente su situación: _____

Nombre de los Niños	Grado	Escuela	Distrito

Firma del Padre/Guardián/Proveedor de Cuidado o Joven No Acompañado _____ Fecha _____

Para Uso Exclusivo de la Escuela
 I certify the above named student qualifies for the Child Nutrition Program under the provision of the McKinney-Vento Act.

 McKinney-Vento Liaison Signature Date

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 BISD no discrimina a base de raza, color, origen nacional, sexo, religión, edad, discapacidad e información genética en el empleo o en la provisión de servicios, programas e actividades.

RFA BISCR-10 (Single-LEA Application)
 H2019-20(1)

Spanish



Student Intake Form



Dr. René Gutiérrez
Superintendent of Schools

BROWNSVILLE INDEPENDENT SCHOOL DISTRICT

YOUTH CONNECTION PROJECT Student Intake Form

The following student(s) are eligible for services under the McKinney-Vento Act 42 U.S.C. 11434a(2), which is also known as Title IX, Part A of the Every Student Succeeds Act.

Student Name:					
		<i>Last Name</i>		<i>First Name</i>	
		<i>Middle Name</i>			
D.O.B.		School ID#		Unaccompanied Youth	<input type="checkbox"/> Yes <input type="checkbox"/> No
School:					Grade Level
Last District Attended:			Last School Attended:		
Student's Previous Address:			City, State:		
Student's Current Address:			Telephone Number:		
Documentation Provided:	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Parent's ID <input type="checkbox"/> Utility Bill <input type="checkbox"/> Rent Receipt		District/Campus Issued:	<input type="checkbox"/> Falsifying Information Penalty Acknowledgement <input type="checkbox"/> Student/Parent Handbook <input type="checkbox"/> UIL Packet for Students in Grades 9-12 <input type="checkbox"/> Attendance Commitment Letter/Attendance Notice	

BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
YOUTH CONNECTION PROJECT
Student Intake Form

The following student(s) are eligible for services under the McKinney-Vento Act 42 U.S.C. 11434a(2), which is also known as Title IX, Part A of the Every Student Succeeds Act.

Student Name: _____
 Last Name: _____ First Name: _____ Middle Name: _____
 D.O.B.: _____ School ID#: _____ Unaccompanied Youth: Yes No
 School: _____ Grade Level: _____
 Last District Attended: _____ Last School Attended: _____
 Student's Previous Address: _____ City, State: _____
 Student's Current Address: _____ Telephone Number: _____
 Documentation Provided: Birth Certificate Parent's ID Utility Bill Rent Receipt Falsifying Information Penalty Acknowledgement Student/Parent Handbook UIL Packet for Students in Grades 9-12 Attendance Commitment Letter/Attendance Notice

Current Living Arrangement

Residence: Vehicle Street Shelter Detention Foster Care Other _____
 Reason: _____
 Room # _____ Where: _____
 Telephone Number: _____
 Guardian Mother: _____
 Guardian Father: _____
 CFS Caseworker: _____
 UIL Packet for Students in Grades 9-12: Yes No

Penalty for Falsifying Information Acknowledgement

Health Services: _____
 Health Card on File at: _____
 Delinquent Immunization: Yes No

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Student Intake Form

BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
 Dr. Renee Guillot
 Superintendent of Schools

YOUTH CONNECTION PROJECT
 Student Intake Form

The following student(s) are eligible for services under the McKinney-Vento Act (20 U.S.C. 11412c), which is also known as Title IX, Part A of the Every Student Succeeds Act.


Student Name:	_____ <small>Last Name</small>	_____ <small>First Name</small>	_____ <small>Middle Name</small>
D.O.B.:	_____ <small>School ID#</small>	_____ <small>Unaccompanied Youth</small>	_____ <small>Grade Level</small>
School:	_____ <small>City, State</small>		
Last District Attended:	_____ <small>Last School Attended:</small>		
Student's Previous Address:	_____ <small>City, State</small>		
Student's Current Address:	_____ <small>Telephone Number:</small>		
Documentation Provided:	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Parent ID <input type="checkbox"/> Utility Bill <input type="checkbox"/> Other: _____ <input type="checkbox"/> Eviction <input type="checkbox"/> Foreclosure <input type="checkbox"/> Fire <input type="checkbox"/> Flood <input type="checkbox"/> Unemployed <input type="checkbox"/> Divorce <input type="checkbox"/> Separation <input type="checkbox"/> Run Away <input type="checkbox"/> Refugee <input type="checkbox"/> Loss of Employment <input type="checkbox"/> Economic Hardship <input type="checkbox"/> Doubled Up Identification Verification (must be on file) <input type="checkbox"/> Other Reason: _____		
Current Living Arrangement <input type="checkbox"/> Vehicle <input type="checkbox"/> Street <input type="checkbox"/> Evicted <input type="checkbox"/> Foreclosure <input type="checkbox"/> Fire <input type="checkbox"/> Flood <input type="checkbox"/> Unemployed <input type="checkbox"/> Hurricane Name: _____ <input type="checkbox"/> Station <input type="checkbox"/> Tent <input type="checkbox"/> Divorce <input type="checkbox"/> Separation <input type="checkbox"/> Run Away <input type="checkbox"/> Refugee <input type="checkbox"/> Flood <input type="checkbox"/> Tornado <input type="checkbox"/> Wildfire <input type="checkbox"/> Overcrowded <input type="checkbox"/> Loss of Employment <input type="checkbox"/> Economic Hardship <input type="checkbox"/> Doubled Up Identification Verification (must be on file) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____			
Hotel/Motel/Shelter:	_____ <small>Address:</small>	_____ <small>Room #</small>	_____ <small>Telephone Number:</small>
Guardian/Mother/Caregiver Name:	_____ <small>Current Address:</small>		
Current Address:	_____ <small>Telephone Number:</small>	_____ <small>Telephone Number:</small>	_____ <small>Telephone Number:</small>
Guardian/Father/Caregiver Name:	_____ <small>Current Address:</small>		
Current Address:	_____ <small>Telephone Number:</small>	_____ <small>Telephone Number:</small>	_____ <small>Telephone Number:</small>
CPS Caseworker:	_____ <small>Case #</small>	_____ <small>Telephone Number:</small>	_____ <small>Telephone Number:</small>

2-108-E



Current Living Arrangement				
Unsheltered	<input type="checkbox"/> Vehicle <input type="checkbox"/> Street <input type="checkbox"/> Station <input type="checkbox"/> Tent <input type="checkbox"/> Overcrowded <input type="checkbox"/> Other: _____	Doubled Up Reason	<input type="checkbox"/> Evicted <input type="checkbox"/> Foreclosure <input type="checkbox"/> Fire <input type="checkbox"/> Flood <input type="checkbox"/> Unemployed <input type="checkbox"/> Divorce <input type="checkbox"/> Separation <input type="checkbox"/> Run Away <input type="checkbox"/> Refugee <input type="checkbox"/> Loss of Employment <input type="checkbox"/> Economic Hardship <input type="checkbox"/> Doubled Up Identification Verification (must be on file) <input type="checkbox"/> Other Reason: _____	<input type="checkbox"/> Hurricane Name: _____ <input type="checkbox"/> Flood <input type="checkbox"/> Tornado <input type="checkbox"/> Wildfire <input type="checkbox"/> Other: Date: Where:
	Hotel/Motel/Shelter:		Room #	
Address:	Telephone Number:			
Guardian/Mother/Caregiver Name				
Current Address:	Telephone Number:			
Guardian/Father/Caregiver Name				
Current Address:	Telephone Number:			
CPS Caseworker	Case #	Telephone Number:		

Student Intake Form


BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
 Superintendent of Schools
YOUTH CONNECTION PROJECT
Student Intake Form

The following students are eligible for services under the McKinney-Tome Act (22 U.S.C. 11216d), which is also known as Title IX, Part 4 of the Every Student Succeeds Act

Student Name:	Last Name		First Name		Middle Name	
D.O.B.:	School ID#	Unaccompanied Youth	<input type="checkbox"/> Yes <input type="checkbox"/> No			
School:	Last School Attended:		City, State:		Grade Level:	
Student's Previous Address:	City, State:		Telephone Number:			
Student's Current Address:	City, State:		Telephone Number:			
Documentation Provided:	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> Parent's ID <input type="checkbox"/> Utility Bill <input type="checkbox"/> Rent Receipt	<input type="checkbox"/> Driver's License <input type="checkbox"/> Current ID <input type="checkbox"/> Issued:	<input type="checkbox"/> Falsifying Information Penalty Acknowledgment <input type="checkbox"/> Student's Social Security Number <input type="checkbox"/> UIL Packet for Students in Grades 9-12 <input type="checkbox"/> Attendance Commitment Letter (Attendance Notice)			
Current Living Arrangement						
<input type="checkbox"/> Vehicle <input type="checkbox"/> Street <input type="checkbox"/> Student <input type="checkbox"/> Other	<input type="checkbox"/> Evicted <input type="checkbox"/> Fleeing <input type="checkbox"/> Fire <input type="checkbox"/> Flood <input type="checkbox"/> Unemployed <input type="checkbox"/> Divorce <input type="checkbox"/> Separation <input type="checkbox"/> Run Away <input type="checkbox"/> Abuse	<input type="checkbox"/> Loss of Employment <input type="checkbox"/> Economic Hardship <input type="checkbox"/> Disability <input type="checkbox"/> Identification Verification (used by us file)	<input type="checkbox"/> Other Reason	Street Number	Street Name	
Hotel/Motel/Shellers:	Address:	City:	State:	Zip:	Where:	
Guardian/Mother:	Address:	City:	State:	Zip:	Where:	
Guardian/Father:	Address:	City:	State:	Zip:	Where:	
CPS Caseworker:	Address:	City:	State:	Zip:	Where:	
UIL Packet for Students in Grades 9-12						
<input type="checkbox"/> UIL Residency Checklist	<input type="checkbox"/> UIL PAPF	<input type="checkbox"/> UIL Waiver	<input checked="" type="checkbox"/> X			
Penalty for Falsifying Information Acknowledgment						
Section 37.10 Penal Code, an individual knowingly falsifying information on a form required for enrollment of a student can be liable for the maximum tuition fee under Section 25.038 or the amount budgeted for the student whichever is greater.			<input checked="" type="checkbox"/> X			
Health Services						
Health Card on File at _____			<input checked="" type="checkbox"/> X			
Delinquent Immunizations: Yes or No			<input checked="" type="checkbox"/> X			

ISD does not discriminate on the basis of race, color, national origin, sex, religion, age, disability or genetic information in employment or provision of services, programs or activities.

2/19/18

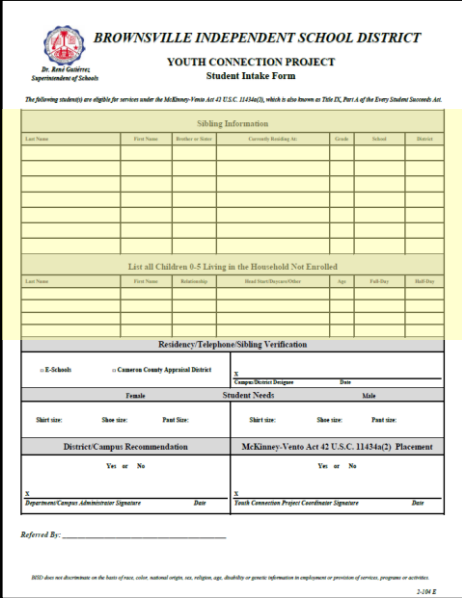
UIL Packet for Students in Grades 9-12	
<input type="checkbox"/> UIL Residency Checklist <input type="checkbox"/> UIL PAPF <input type="checkbox"/> UIL Waiver	<input checked="" type="checkbox"/> X Guardian/Parent/Unaccompanied Youth Signature _____ Date _____
Penalty for Falsifying Information Acknowledgment	
Section 37.10 Penal Code, an individual knowingly falsifying information on a form required for enrollment of a student can be liable for the maximum tuition fee under Section 25.038 or the amount budgeted for the student whichever is greater.	<input checked="" type="checkbox"/> X Guardian/Parent/Unaccompanied Youth Signature _____ Date _____
Health Services	
Health Card on File at _____	<input checked="" type="checkbox"/> X
Delinquent Immunizations: Yes or No	<input checked="" type="checkbox"/> X Guardian/Parent/Unaccompanied Youth Signature _____ Date _____



Student Intake Form

Sibling Information						
Last Name	First Name	Brother or Sister	Currently Residing At:	Grade	School	District

List all Children 0-5 Living in the Household Not Enrolled						
Last Name	First Name	Relationship	Head Start/Daycare/Other	Age	Full-Day	Half-Day



Student Intake Form

BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
 Dr. Ross Gaddis,
 Superintendent of Schools

YOUTH CONNECTION PROJECT
 Student Intake Form

The following student(s) are eligible for services under the McKinney-Vento Act of U.S.C. 11434(a)(2), which is also known as Title IX, Part A of the Every Student Succeeds Act.

Sibling Information						
Last Name	First Name	Gender or Name	Current Building No.	Grade	School	Status

List all Children 0-5 Living in the Household Not Enrolled						
Last Name	First Name	Relationship	Start Date/Current Other	Age	Full Day	Half Day

Residency/Telephone/Sibling Verification			
<input type="checkbox"/> E-Schools	<input type="checkbox"/> Cameron County Appraisal District	2	
Parents		Student Needs: _____	
Shirt size:	Shoe size:	Pant size:	Male
District/Campus Recommendation		McKinney-Vento Act 42 U.S.C. 11434a(2) Placement	
Yes or No		Yes or No	
2		2	
Department/Campus Administrator Signature		Youth Connection Project Coordinator Signature	
Date		Date	

Referred By: _____

MSJ does not discriminate on the basis of race, color, national origin, sex, religion, age, disability or genetic information in employment or provision of services, programs or activities.

2019-20

Residency/Telephone/Sibling Verification	
<input type="checkbox"/> E-Schools <input type="checkbox"/> Cameron County Appraisal District	<input checked="" type="checkbox"/> _____ Campus/District Designee Date
Female	Student Needs
Shirt size: Shoe size: Pant Size:	Shirt size: Shoe size: Pant size:
District/Campus Recommendation	McKinney-Vento Act 42 U.S.C. 11434a(2) Placement
Yes or No	Yes or No
<input checked="" type="checkbox"/> _____ Department/Campus Administrator Signature Date	<input checked="" type="checkbox"/> _____ Youth Connection Project Coordinator Signature Date



Submitting Forms

Submit forms for processing to:

Lilibeth López llopez1@bisd.us

Nora H. Gomez nhgomez@bisd.us



Resources Available



FNS will provide meal packages from 11 a.m. to 1 p.m. every Tuesday, at the following 12 locations:

- Besteiro Middle School – 6280 Southmost Rd.
- Castaneda Elementary – 3201 Lima St.
- Central Administration Building – 708 Palm Blvd.
- Hanna Early College High School – 2615 E. Price Rd.
- Lopez Early College High School – 3205 S. Dakota Ave.
- Manzano Middle School – 2580 W. Alton Gloor Blvd.
- Morningside Elementary – 1025 Morningside Rd.
- Pace Early College High School – 314 E. Los Ebanos Blvd.
- Porter Early College High School – 3500 International Blvd.
- Pullam Elementary – 3200 Madrid Ave.
- Rivera Early College High School – 6955 Ruben M. Torres Blvd.
- Vela Middle School – 4905 Paredes Line Rd.



Additional resources for students experiencing homelessness while schools are closed:

- Texas Education Agency COVID-19 Support and Guidance
- Texas Education for Homeless Children and Youth Program
- Texas Network of Youth Services (TNOYTS): Provider Directory
- Texas Workforce Commission COVID-19 Resources
- Texas Health and Human Services COVID-19 Resources
- 211 Texas for Community Resources
- U.S. Interagency Council on Homelessness: Supporting Children and Youth Experiencing Homelessness COVID-19 Resources
- National Center for Homeless Education COVID-19 Resources
- B.I.S.D. Youth Connection Project <https://youthconnectionprojectbisd.weebly.com/>



Resources available to provide meals for students experiencing homelessness while school buildings are closed:

- FOODPANTRIES.ORG
- Aunt Bertha/The Social Care Network
- Good Neighbor Settlement House
 - Telephone Number: (956) 542-2368
 - Located at 1254 E. Tyler Street, Brownsville, Texas 78520



For more information please contact:

Diana E. Clough
Project Coordinator
(956) 544-6612
clough@bisd.us

