



NYSTEACHS.org

The New York State Technical Assistance
Center for Homeless Students

McKinney-Vento Liaisons are required to refer students and families to key services and supports.

These supports include early education, health and mental health care, housing, and other appropriate supports. Our template referral lists are intended to help you streamline your referral process and/or provide information that may be needed in a sensitive manner. Please note that these forms don't replace individualized assistance; they are meant to give you and your families a starting point and summary of local referrals.

Our referral toolkit includes four different customizable templates

- General Referrals
- Housing Referrals
- Health Referrals
- Youth Referrals

Using the toolkit

1. **Add local contact info.** For each of the four referral list templates:
 - Read through the form instructions.
 - Follow the hyperlinks provided and search for local agencies.
 - Type local contact and agency information into the forms or a draft document.
2. **Vet your sources.** For each of the four referral list templates:
 - Call any contacts/agencies you don't already know to confirm services provided. Whenever possible, visit in person, so you can let families know what to expect.
Don't refer families to agencies you haven't vetted!
 - Touch base with colleagues who may have additional information.
3. **Spread the word!**
 - Make photocopies of the referral lists to be distributed to families and youth.
 - Create a binder with the referral lists and additional paper to be kept in a central school location, like the front office. Let school staff know where to find the information and to leave notes for one another about helpful connections and referrals.
 - Update the referral lists on an ongoing basis.

GENERAL REFERRALS

Instructions

Please fill in the form with local agency information. Then, you can copy and share!

1. In the top two boxes, fill in the **Liaison Name + Contact Info** as well as the **LEA Name (District/Charter School/BOCES)** and **Office Location** (if needed).
2. In the second box, enter the name and contact information for your **Local Department of Social Services**. Visit ocfs.ny.gov/main/localdss.asp to find this information.

3. Instructions for Table

Use the links below to find local programs and services. Add them and any other local programs you wish to include into the chart. Add one program per row, checking off the services that program provides. If you need more space, we recommend saving a second version of the form and printing double-sided.

- **Legal Help**
 - Lawhelpny.org
- **Shelter & Housing, Rental Assistance, Food Stamps**
 - [Local Department of Social Services](#)
- **Housing, Food, Family Programs**
 - [Salvation Army](#)
 - [United Way](#)
 - [Community Action Agency](#)
 - [Youth Bureau](#)
 - [Food Bank\(s\)](#)
 - [Boys and Girls Club](#)
 - [YMCA](#)
- **Child Care & Preschool**
 - [Child Care Resource & Referral Agencies](#)

HOUSING REFERRALS

Instructions

Please fill in the form with local agency information. Then, you can copy and share!

1. In the top two boxes, fill in the **Liaison Name + Contact Info** as well as the **LEA Name (District/Charter School/BOCES)** and **Office Location** (if needed).

2. Instructions for Table

Use the links below to find local housing and shelter providers. Add them and any other local programs you wish to include into the chart. Add one program per row, checking off the services that program provides. If you need more space, we recommend saving a second version of the form and printing double-sided.

Make sure to check with the local provider to see which specific services are offered.

- Local [Department of Social Services](#)
- [LawHelpNY.org](#)
 - Search for legal services and eviction prevention services
- Local [Community Action Partnership Center](#)
- Local [Community-Based Housing Organizations](#)
- Local [Housing Authority](#)
- [Rent Connect HCR](#)

HEALTH AND WELLNESS REFERRALS

Instructions

Please fill in the form with local agency information. Then, you can copy and share!

1. In the top two boxes, fill in the **Liaison Name + Contact Info** as well as the **LEA Name (District/Charter School/BOCES)** and **Office Location** (if needed).
2. **Health Clinics & Immunizations:** Enter agency and contact information for local health clinics. Visit the following links to find local agencies:
 - County Health Departments: health.ny.gov/contact/contact_information
 - U.S. Gov Health Center Finder: <https://findahealthcenter.hrsa.gov/>
3. **Vision:** Navigate to NYSED's announcement about eye exams and vision resources: nysed.gov/news/2017/state-education-department-announces-no-cost-childrens-eye-exams-glasses-and-resources. Visit links and enter information about local vision programs.
4. **Dental:** Navigate to NY's Dept of Health webpage and follow links to find local dental programs: health.ny.gov/prevention/dental/dental_resource_directory.htm. Enter information about local dental programs.
5. **Nurse:** Enter contact information for school or district nurse.

YOUTH REFERRALS

Instructions

Please fill in the form with local agency information. Then, you can copy and share!

1. In the top two boxes, fill in the **Liaison Name + Contact Info** as well as the **LEA Name (District/Charter School/BOCES)** and **Office Location** (if needed).
2. **Local Runaway and Homeless Youth program(s)**: visit the OCFS directory of programs and enter local info: ocfs.ny.gov/main/youth/rhy/directory.asp
3. **LGBTQ Local Resources**: find your local resource centers: lgbtcenters.org/LgbtCenters and ocfs.ny.gov/main/youth/rhy/directory.asp
4. **Open Space for Local Resources**: Fill with any additional programs and services youth may be interested in.