

Packet for Parents Facing Incarceration

Provided by:

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The McKinney-Vento homeless education program at Ardmore City Schools provides a packet of information to assist parents facing incarceration with making appropriate arrangements for their children.

Included in the packet are:

- Checklist for parents facing incarceration
- Frequently asked questions
- Blank power of attorney form
- School Notification Letter
- Caregiver Authorization (if needed)
- McKinney-Vento brochure
- Names and phone number of the state homeless coordinator

What do I need to do for my children if I might be going to jail?

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1. Find someone to care for your children.
2. Fill out "Power of Attorney" form for that caregiver. This **will not** give the caregiver more power than you. It will give the caregiver equal power so that the caregiver can sign for medical care, school events etc. This power of attorney only lasts as long as you decide.
3. Make sure the school counselor, school-based social worker or principal knows what is going on. Even if you are going to be in jail for a short time, the school needs to know who to call if your child is hurt or sick. Give a copy of the power of attorney to the school counselor, school-based social worker or principal.
4. Also, make sure the caregiver contacts school's McKinney-Vento district liaison to determine if your child qualifies for special educational support and services.
4. Make sure your children have the address of the jail so they can write you. You might want to provide them with addressed envelopes with stamps.
5. If you want your children to visit you in jail, make these arrangements ahead of time. The adults who may be taking your children to visit you need to also be on your visiting list. Children can not visit you without an adult.
6. If you have insurance cards and other important documents for your children, leave them with your children's caregiver while you are in jail.
7. Leave this packet of information with your child's caregiver.

Frequently Asked Questions

1. Will protective services get involved with my family while I am in jail?

Child Protective Services will investigate reported abuse or neglect. Being in jail is not neglect when you have made arrangements for your child to be cared for, including the use of a “power of attorney” form.

2. Can my children visit me in jail?

Yes, but not without an adult being with them. The adult and the children must all be on your visiting list.

3. Do I need a lawyer to work on the “Power of Attorney”?

No. You may fill it in yourself, but you DO need a witness and a notary. It does not cost anything to have a notary sign it. Notaries can be found at banks, most school Superintendent’s offices and the county judicial building.

4. What if the person who is going to care for my children does not live in the school district my children attend? Do my children need to change schools?

NO! Your children do not need to move schools. They are allowed to remain in the school they were in before they started living with the caregiver. Your child may be considered an “unaccompanied youth” which means they are living with someone besides a parent or guardian. Transportation is also available through the Ardmore Schools McKinney-Vento District Liaison, Sabra Emde, (580) 221-3001, ext 252

5. Is there anyone my child can talk to if he or she is upset about the situation?

Yes, you can make arrangements with your child’s school counselor.

For more information contact:

Sabra Emde
McKinney-Vento District Liaison
Ardmore City Schools
580-221-3001, ext 252

Alice Byrd
State Homeless Coordinator
Oklahoma State Department of Education
405-521-2785

POWER OF ATTORNEY FOR CHILD

KNOW ALL PERSONS that I, _____, of
(Parent Name)
_____, _____, _____,
(City) (County) (State)

appoint _____, to be my lawful attorney-
(Caregiver's Name)

in-fact (the Agent or Attorney-in-Fact) regarding my minor child(ren):

_____	_____
(Child's Name)	(Child's Name)
_____	_____
(Child's Name)	(Child's Name)
_____	_____
(Child's Name)	(Child's Name)

I hereby grant to the Attorney-in-Fact, all of my powers regarding the care and custody of my above-named minor child(ren), except my power to consent to marriage or adoption of my above-named minor child(ren) and my power to sell, transfer, convey or otherwise manage any real or personal property belonging to my above-named minor child(ren).

If it is necessary to reach me at any time while this power of attorney is in effect, I may be reached at:

(Address and/or Phone Number)

The rights, power and authority herein granted shall remain in full force from _____ until one of the following events occurs: the termination date, 6 months
(Start Date)
from _____ occurs, terminated as required by state law, or terminated by a
(End Date)
written Revocation of Power of Attorney signed by me, whichever happens first. This Power of Attorney shall not be affected by my disability or incapacity. The authority herein granted to my Attorney-in-Fact, is exercisable by him or her, notwithstanding my later disability or incapacity or later uncertainty as to whether I am dead or alive.

I hereby release from liability any individual, business or health care provider providing medical care in reliance on this document from liability relating to acceptance of this forma and the Attorney-in Fact's consent.

IN WITNESS WHERE OF I have hereunto set my signature this ___day of ____, 20__.

(Parent Signature)

Subscribed and sworn to before me on this _____ day of _____, 20_____.

Notary's Signature

School Notification

Date: _____

Dear School Principal:

Please be advised that my child/children:

(Child's Name)

(Child's Name)

(Child's Name)

(Child's Name)

(Child's Name)

(Child's Name)

will be residing with my: _____
(caregiver's relationship to child/children)

Please update the contact, address and phone information for my child/children to:

Emergency Contact Name(s): _____

New Address: _____

New Phone: _____-Home _____-Cell
 _____ -Home _____-Cell

Thank you,

Parent Signature

Parent Printed Name

(Parent: Please be sure to provide a copy of this form to EACH school for ALL of your children.)

Caregiver Authorization Form

This form is intended to address the McKinney-Vento Homeless Assistance Act (P.L. 107-110) requirement that homeless children have access to education and other services for which they are eligible. The McKinney-Vento Homeless Assistance Act states specifically that barriers to enrollment must be removed. In some cases, a child or youth who is homeless may not be able to reside with his/her parent or guardian; however, this fact does not nullify the child's/youth's right to receive a free, appropriate public education.

Instructions:

Complete this form for a child/youth presenting himself/herself for enrollment while not in the physical custody of a parent or guardian.

■ To authorize the enrollment in school of a minor, complete items 1 through 4 and sign the form.

■ To authorize the enrollment and school-related medical care of a minor, complete all items and sign the form.

I am 18 years of age or older and have agreed to fulfill the role of caregiver for the minor named below.

1. Name of minor: _____

2. Minor's date of birth: _____

3. My name (adult giving authorization): _____

4. My home address: _____

5. 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 as to 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.

6. My date of birth: _____

7. My state driver's license or identification card number: _____

I declare under penalty of perjury under the laws of this state that the foregoing information is true and correct.

Signature: _____ Date: _____