

TEMPLATE SHELTER RESIDENCY LETTER

[Date]

To Whom It May Concern,

This letter is to inform you that [parent's name] and her/his children [children's names] are currently residing in [name of shelter], a safe home/shelter for survivors of domestic violence. The family moved into the safe home/shelter at a confidential location on [date].

Please update the address in ATS for [children's names] to reflect the P.O. Box for the shelter, which is:

C/O [Shelter name]

P.O. Box [insert #] or Office of Address for Provider

[Borough], NY [Zip code]

All correspondence for [parent's name] regarding [children's names] should be send to the P.O. Box/address above. The parent cannot share the location of the shelter with the school, and if the shelter location is mistakenly disclosed **UNDER NO CIRCUMSTANCES SHOULD THE SCHOOL ENTER THE DV SHELTER'S STREET ADDRESS INTO ATS.**

Please update the children's Housing Status to "S" for shelter in ATS. **INCLUDE THE FOLLOWING IF BUSING WILL BE REQUESTED:** It would be greatly appreciated if you could update the address and Housing Status information as promptly as possible because I will be submitting a request for busing to the Office of Pupil Transportation (OPT), and OPT will not process the request until the school has updated the address information. Please provide a [Housing Questionnaire](#) to the parent, help them complete it, and give them a copy of the completed form so that I can include it in the request for busing, as required by OPT.

INCLUDE IF THE STUDENT HAS DOOR-TO-DOOR BUSING ON THEIR IEP: Please inform the Transportation Coordinator at the Borough Field Support Center of the change in address and request that the Transportation Coordinator update the STRE screen in ATS with the new address information so that busing can be re-routed.

Please be aware of the need for confidentiality regarding these students. Under Chancellor's Regulations A-820 Section IV.C. requests for information made by a parent with whom the child does not reside must be reported to the parent with physical custody before the school can release any information to the non-custodial parent. Please inform [parent's name] if you are contacted by anyone requesting information about the children consistent with the Chancellor's Regulations prior to the release of any student records. Please also ensure that the appropriate staff at the school are made aware of the need for confidentiality regarding these students. This is important because abusive partners will often use the school system to track or stalk their families, and we ask that school staff help minimize this danger in this case.

INCLUDE IF THE ABUSER IS BARRED FROM CONTACTING THE CHILD: [Abuser's name] is barred from having contact with his/her children. If [abuser's name] is observed by any school staff or if the children report that they have seen him/her by the school, immediately contact [TBD]. Additionally, please enter Authorization Code 07 for [abuser's name] in the Parent/Guardian screen in ATS. **INCLUDE IF THERE IS AN ORDER OF PROTECTION:** Attached please find the order of protection.

If you need any additional information, please do not hesitate to contact me at [caseworker's tel. # and email]. Thank you in advance for your attention to this important matter.

Sincerely, [Caseworker's name]