

Oral Statement Form

This auditable document must be completed in blue or black ink OR typed. Do not use correction fluid or tape to make corrections.

Guidelines for Using the Form

- Use this form if the parent/guardian or qualified student **DOES NOT** provide sufficient documentation regarding a student's whereabouts.
- Use this form to document student whereabouts per requirements in **TEA PEIMS Appendix D.**
- A valid statement on this form is typically used as supporting documentation for L16.**

Oral Statement Form

How to Complete the Form :

- 1 **Campus and Student Information –** Parent/guardian must enter information if applicable.
- 2 **Part I: The student –** Complete all fields.
- 3 **Part II: The statement –** Complete all applicable fields. The statement must be given by or taken from an adult. Include the person’s relationship to the student
- 4 **Part II: The statement –** The person providing the statement must sign the form if he/she is present.
- 5 **District staff –** If HISD staff takes the statement, then he/she must sign and date the form.
- 6 **Administrative staff –** The campus administrator must sign and date the form.

**HOUSTON INDEPENDENT SCHOOL DISTRICT
ORAL STATEMENT FORM**

Directions: Use this form to document an oral statement by an adult neighbor or other adult with knowledge of the family's whereabouts. The form must be signed and dated by an authorized campus or district administrator. This form is to be used as a supporting document for leaver code L16 only. **Keep the signed, original form in the student's Leaver folder.**

Campus Name: _____ Campus #: _____ Date: _____
 Student's Name: _____
First Name Middle Name
 ID Number: _____ of Birth: _____ Gender: Male Female

Part I: The student *(Check appropriate box)*

Is a No-Show
 Is Moving/Has Moved to a New Address _____
Street Address City State Zip Code
 Withdrew from our school *(date)* _____
Date

Part II: The statement *(Please complete)*

On _____ at approximately _____ A.M. P.M., I spoke with _____
Date Time Full Name
 who is the _____ to the above named student.
Relationship to Student

The person giving the statement *(Check one)*

is an adult *(18 years or older)* is a minor *(younger than 18 years)*

He/She stated that the above named student *(Check appropriate box and provide the requested information)*

Is/Was enrolled at _____ in _____
School City State
 on *(exact or approximate date)* _____
Date
 Has returned to home country _____
City Country
 Other *(please explain)* _____

Signature of person giving the statement *(if in person)*: _____

DISTRICT USE ONLY

Name of district staff taking the statement _____ Title _____ Date _____
 Administrator's Signature _____ Title _____ Date _____

Federal and State Compliance, Revised _____