

North Carolina Homeless Education Program

Office of Federal Programs McKinney-Vento Funds Amendment Form 2026-2027SY

This form is to be completed by the district's homeless liaison.

Local Education Agency (LEA) Name & Code:	Date of Request:
District Homeless Liaison Name:	District Homeless Liaison Email & Phone Number:

This amendment request is for the funding source:

- ☐ PRC 0026: McKinney-Vento Subgrant Funds
☐ PRC 0026: McKinney-Vento Carryover Funds

The amount of funds awarded for the 2026-2029SY McKinney-Vento Subgrant is: \$30,000, \$60,000, \$90,000, \$120,000, \$150,000	
The amount of carryover from this funding source during the 2025-2026SY was: If no subgrant money was carried over, then state "0" in the box.	\$
The total amount of funds being requested to be amended in the current budget is:	\$
The total number of students identified as homeless by the LEA during the 2025-2026SY was:	
The total number of students <u>currently identified</u> as homeless by the LEA is:	

In the box below, provide specific details and justification for any requested amendment, including the amount(s) for each activity. Use as much space as needed to explain the request being made.

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Please read the following statements and check the box below that, as the district's homeless liaison, you understand:

- ☐ An approved amendment notice will be provided to you. The approval from NCHP should then be shared with the district's finance division for the budget changes to be submitted to the department.
- ☐ A denied amendment notice will be provided to you. As the district homeless liaison, you will need to speak with your program administrator at NCHP for further guidance when the budget request has been denied.
- ☐ Maintaining a copy of the approval or denial notice in the LEA record is a requirement when accepting federal funding. In addition, this form may be requested during monitoring, end-of-year reporting, audits, or other times.
- ☐ If you have questions regarding this form, contact your program administrator at NCHP.

Signature of District's Homeless Liaison: _____ Date Submitted: _____

Completed McKinney-Vento Funding amendment form requests are to be sent to [Beth Branagan](#)

NCHP OFFICE USE ONLY:

Date Received _____

- ☐ Approval Notice Sent to the District Homeless Liaison on _____ By _____
- ☐ Notice of Request Denied Sent to the District Homeless Liaison on _____ By _____

The reason for the denial is: _____