

**STATE OF NEW JERSEY**  
**DEPARTMENT OF EDUCATION**  
**DIVISION OF ADMINISTRATION & FINANCE**  
**OFFICE OF SCHOOL FINANCE**

**INSTRUCTION MANUAL**

**APPLICATION FOR**  
**STATE RESPONSIBLE HOMELESS TUITION**  
**REIMBURSEMENT**

For Costs within the Fiscal Year

**2015-2016**

(Revised as of 05-10-2016)

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## **Purpose**

The purpose of this application is to allow a school district to apply for reimbursement for the tuition of homeless students who have been determined to be state responsible. This reimbursement is for costs incurred by the school district during the 2015-2016 school year.

An on-line application must be completed for each state responsible homeless student who is eligible for tuition reimbursement.

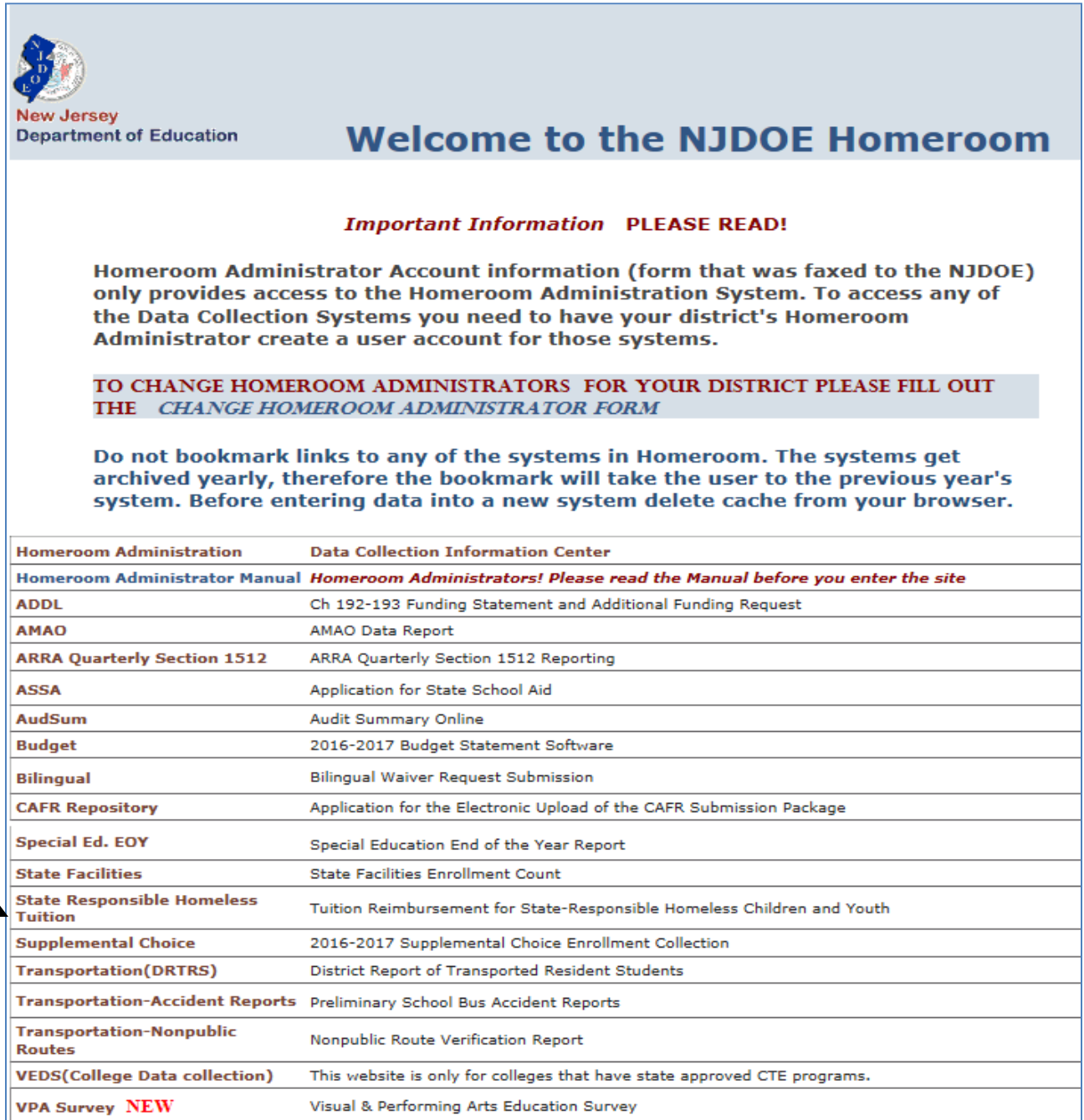
In the case of a homeless child, the Department of Education will pay the weighted base per-pupil amount calculated pursuant to N.J.S.A. 18A:7F-50 and the appropriate special education and security categorical aids per pupil pursuant to N.J.S.A. 18A:7F-55 and 56 to the school district in which the child is enrolled for the first year of the homeless child's attendance in that school district.

This application also allows a school district to apply for tuition reimbursement for students attending school in a district because the family resides in a domestic violence facility. The reimbursement is only available after the first year of attendance in the school district where the shelter or transitional facility is located.

## [Accessing the Application](#)

The **State Responsible Homeless Tuition** web application can be accessed from the Homeroom website of the Department of Education.

<http://homeroom.state.nj.us/>



|   |   |
|---|---|
| <b>Homeroom Administration</b>            | <b>Data Collection Information Center</b>   |
| <b>Homeroom Administrator Manual</b>      | <b><i>Homeroom Administrators! Please read the Manual before you enter the site</i></b> |
| <b>ADDL</b>                               | Ch 192-193 Funding Statement and Additional Funding Request                             |
| <b>AMAO</b>                               | AMAO Data Report  |
| <b>ARRA Quarterly Section 1512</b>        | ARRA Quarterly Section 1512 Reporting   |
| <b>ASSA</b>                               | Application for State School Aid  |
| <b>AudSum</b>                             | Audit Summary Online  |
| <b>Budget</b>                             | 2016-2017 Budget Statement Software   |
| <b>Bilingual</b>                          | Bilingual Waiver Request Submission   |
| <b>CAFR Repository</b>                    | Application for the Electronic Upload of the CAFR Submission Package                    |
| <b>Special Ed. EOY</b>                    | Special Education End of the Year Report  |
| <b>State Facilities</b>                   | State Facilities Enrollment Count   |
| <b>State Responsible Homeless Tuition</b> | Tuition Reimbursement for State-Responsible Homeless Children and Youth                 |
| <b>Supplemental Choice</b>                | 2016-2017 Supplemental Choice Enrollment Collection                                     |
| <b>Transportation(DRTRS)</b>              | District Report of Transported Resident Students  |
| <b>Transportation-Accident Reports</b>    | Preliminary School Bus Accident Reports   |
| <b>Transportation-Nonpublic Routes</b>    | Nonpublic Route Verification Report   |
| <b>VEDS(College Data collection)</b>      | This website is only for colleges that have state approved CTE programs.                |
| <b>VPA Survey <b>NEW</b></b>              | Visual & Performing Arts Education Survey   |

Selecting the Homeless application by double clicking on it will take you into the application log in screen.

## [Login](#)

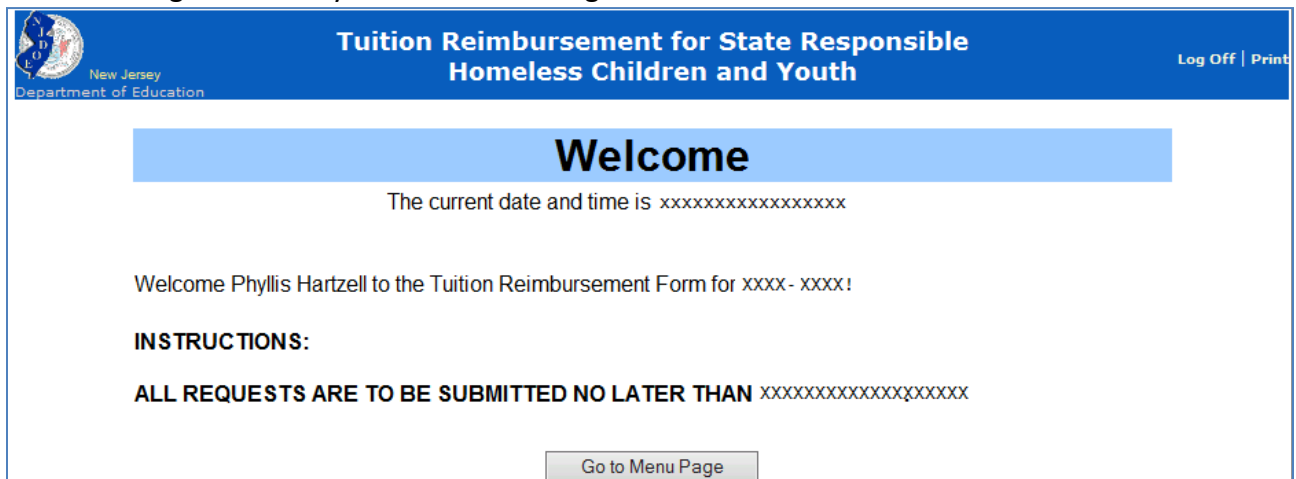
Log in to the application using the 4 digit district code, user ID and password. If you do not have an ID and password, contact your district Homeroom Administrator (formerly the web user administrator [WUA])



The screenshot shows the login interface. At the top, there is a blue header with the New Jersey Department of Education logo on the left and the text "Tuition Reimbursement for State Responsible Homeless Children and Youth" in the center. On the right side of the header, there are links for "Log Off" and "Print". Below the header, a light blue box contains the word "Login" in bold black text. Underneath this box, there are three input fields: "District ID:" with a 4-digit box, "User ID:" with a longer box, and "Password:" with a box. At the bottom of the form area, there are two buttons: "Login" and "Cancel".

Click on the 'Login' button.

Successful login will take you to Welcome Page with instructions.



The screenshot shows the welcome page. It has the same blue header as the login page. Below the header, a light blue box contains the word "Welcome" in bold black text. Underneath this box, the text reads "The current date and time is xxxxxxxxxxxxxxxxxxxx". Below that, it says "Welcome Phyllis Hartzell to the Tuition Reimbursement Form for xxxx - xxxx!". Then, there is a section titled "INSTRUCTIONS:" followed by the text "ALL REQUESTS ARE TO BE SUBMITTED NO LATER THAN xxxxxxxxxxxxxxxxxxxx". At the bottom of the page, there is a button labeled "Go to Menu Page".

Click on 'Go To Menu Page' button to access the "Main Menu" screen.

## Main Menu

The Main Menu screen provides access to four different screens as shown below:

| Main Menu  |  |                   |
|--|--|-------------------|
| District Name: xxxxxxxxxxxxxxxx  | County ID: xx                                  | District ID: xxxx |
| The current date and time is xxxxxxxxxxxxxxxxxx  |  |                   |
| <b>Contact Information</b>   | <input type="button" value="Contact"/>         |                   |
| <b>Student Information</b>   | <input type="button" value="Student"/>         |                   |
| <b>Student Listing Page</b>  | <input type="button" value="Student Listing"/> |                   |
| <b>Certification</b>   | <input type="button" value="Certify"/>         |                   |
| <b>Note: If, after you have certified, you re-enter and change the data (and click on the Certify and Submit button), you must again click on the Certify button to confirm.</b> |  |                   |

Click on the appropriate button to access the required screen.

## Contact Information

A district's contact Information must be entered:

| Contact Information  |  |                   |
|--|--|-------------------|
| District Name: xxxxxxxxxxxxxxxx                              | County ID: xx  | District ID: xxxx |
| The current date and time is xxxxxxxxxxxxxxxxxx              |  |                   |
| <b>Contact Title:</b>  | <input type="text"/>   |                   |
| <b>Contact Name*:</b>  | <input type="text"/>   |                   |
| <b>Contact E-mail Address*:</b>                              | <input type="text"/>   |                   |
| <b>Contact Phone*:</b>                                       | <input type="text"/> (999-999-9999 format)<br>Please include your extension. |                   |
| <b>District Homeless Liaison Name*:</b>                      | <input type="text"/>   |                   |
| <b>District Homeless Liaison E-mail Address*:</b>            | <input type="text"/>   |                   |
| <b>District Homeless Liaison Phone*:</b>                     | <input type="text"/> (999-999-9999 format)<br>Please include your extension. |                   |
| <b>*Required</b>   |  |                   |
| <input type="button" value="Save"/>                          |  |                   |
| <input type="button" value="Cancel/Back to Main Menu Page"/> |  |                   |

## Student Information

The student information page lists all the students for whom an application for tuition reimbursement has been filed.

To enter an application for reimbursement for a particular student, click on “New Entry” on the “Student Information” screen. An “[Enter Student Data](#)” screen appears where you must enter all the applicable information for the particular student.

To revise or delete a particular student, click on the “Last Name” of the student on the “Student Information” screen. An “[Update Student Data](#)” screen appears.

| Student Information   |                  |             |       |            |                   |              |               |             |
|---|------------------|-------------|-------|------------|-------------------|--------------|---------------|-------------|
| District Name:  | xxxxxxxxxxxxxxxx |             |       | County ID: | xx                | District ID: | xxxx          |             |
| The current date and time is xxxxxxxxxxxxxxxxxxxx   |                  |             |       |            |                   |              |               |             |
| * Last Name   | First Name       | NJ Smart ID | Grade | Birth Date | Current Address   | Current City | Current State | Current Zip |
| <a href="#">Dow</a>   | Gray             | 2777775555  | 1st   | 05/04/2010 | PO Box 1437       | Morristown   | NJ            | 07962       |
| <a href="#">Pickert</a>   | John             | 5522114455  | Pre-K | 06/10/2013 | 47 E. Main Street | Flemington   | NJ            | 08822       |
| * Click on Student Last Name to revise or to delete an entry.   |                  |             |       |            |                   |              |               |             |
| <input type="button" value="New Entry"/><br><input type="button" value="Student Listing Page"/><br><input type="button" value="Cancel/Back to Main Menu Page"/> |                  |             |       |            |                   |              |               |             |

## Student Listing

The student listing page shows the detailed record for each student for whom an application for tuition reimbursement has been filed:

| Student Listing  |                  |                 |            |                        |              |    |            |            |              |         |              |            |                 |                    |                     |            |         |                 |  |                 |    |     |  |
|--|------------------|-----------------|------------|------------------------|--------------|----|------------|------------|--------------|---------|--------------|------------|-----------------|--------------------|---------------------|------------|---------|-----------------|--|-----------------|----|-----|--|
| District Name:   | xxxxxxxxxxxxxxxx |                 |            |                        |              |    | County ID: | xx         | District ID: | xxxx    |              |            |                 |                    |                     |            |         |                 |  |                 |    |     |  |
| The current date and time is xxxxxxxxxxxxxxxxxxxx            |                  |                 |            |                        |              |    |            |            |              |         |              |            |                 |                    |                     |            |         |                 | <a href="#">Print this page using the Landscape setting.</a> |                 |    |     |  |
| Please print this page and keep it for your records.         |                  |                 |            |                        |              |    |            |            |              |         |              |            |                 |                    |                     |            |         |                 |  |                 |    |     |  |
| Last Name  | First Name       | Approval Status | NJSmartID  | Current Street Address | Current City | St | Zip        | Birth Date | Grade        | Spec Ed | DV Placement | DV Date    | School Attended | Student Start Date | Student Finish Date | Days Claim | Amt Req | Parent Name     | Last Known Address   | Last Known City | St | Zip |  |
| DOW  | GRAY             |                 | 2777775555 | PO Box 1437            | Morristown   | NJ | 07962      | 05/04/2010 | 1st          | No      | Yes          | 05/04/2013 | fff             | 07/07/2015         | 07/20/2015          | 3          | 3       | ggg33555        |  |                 |    | NJ  |  |
| PICKERT  | JOHN             |                 | 5522114455 | 47 E. Main Street      | Flemington   | NJ | 08822      | 06/10/2013 | Pre-K        | Yes     | Yes          | 10/10/2015 | Hills           | 07/01/2015         | 07/20/2015          | 56         | 10222   | Angelin Pickert |  |                 |    | TX  |  |
| <input type="button" value="Cancel/Back to Main Menu Page"/> |                  |                 |            |                        |              |    |            |            |              |         |              |            |                 |                    |                     |            |         |                 |  |                 |    |     |  |

# Enter New Student Information

| Enter Student Data  |  |                  |
|---|--|------------------|
| District Name:  | xxxxxxxxxxxx   | County ID: xx    |
|   |  | District ID: xxx |
| The current date and time is xxxxxxxxxxxxxxxx   |  |                  |
|   |  |                  |
| Student Last Name:  | <input type="text"/>   |                  |
| Student First Name:   | <input type="text"/>   |                  |
| NJ SMART ID:  | <input type="text"/>   |                  |
| Special Ed:   | <input type="radio"/> Yes <input type="radio"/> No   |                  |
| Student Birth Date:   | <input type="text"/> (mm/dd/yyyy)  |                  |
| Student Grade:  | <input type="radio"/> Pre-Kindergarten <input type="radio"/> Kindergarten <input type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/> 4th<br><input type="radio"/> 5th <input type="radio"/> 6th <input type="radio"/> 7th <input type="radio"/> 8th <input type="radio"/> 9th <input type="radio"/> 10th <input type="radio"/> 11th <input type="radio"/> 12th <input type="radio"/> Ungraded |                  |
| Domestic Violence Placement:  | <input type="radio"/> Yes <input type="radio"/> No   <b>Domestic Violence Out of State:</b> <input type="radio"/> Yes <input type="radio"/> No   |                  |
| Domestic Violence Initial Placement Date:   | <input type="text"/> (mm/dd/yyyy)  |                  |
| Current Domestic Violence Facility Name:  | Pick a Facility <input type="text"/>   |                  |
| Current Street Address:   | <input type="text"/>   |                  |
| Current City:   | <input type="text"/>   |                  |
| Current State:  | <input type="text"/>   |                  |
| Current Zip:  | <input type="text"/>   |                  |
| Placed and Paid by Department of Children and Families:   | <input type="radio"/> Yes <input type="radio"/> No   |                  |
| Receiving Homeless Services:  | <input type="radio"/> Yes <input type="radio"/> No   |                  |
| When did the child become homeless:   | <input type="text"/> (mm/dd/yyyy)  |                  |
| Date moved in to District:  | <input type="text"/> (mm/dd/yyyy)  |                  |
| School Attended for school year 2015-16:  | <input type="text"/>   |                  |
| Student Attendance Start Date for school year 2015-16:  | <input type="text"/> (mm/dd/yyyy)  |                  |
| Student Attendance Finish Date for school year 2015-16:   | <input type="text"/> (mm/dd/yyyy)  |                  |
| No. of Days Claimed 2015-16:  | <input type="text"/> (No decimal)  |                  |
| Amount Requested:   | \$ <input type="text"/> (No decimal)   |                  |
| Parent/Guardian Name:   | <input type="text"/>   |                  |
| Has the Student ever resided in New Jersey:   | <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown   |                  |
| Has the student lived out of state for fewer than 12 consecutive months since leaving New Jersey: | <input type="radio"/> Yes <input type="radio"/> No   |                  |
| While out of state did the parent/guardian own or rent a home where they lived:                   | <input type="radio"/> Yes <input type="radio"/> No   |                  |
| Previous New Jersey Address Prior to Out of State:  | City: <input type="text"/> State: <input type="text"/>   |                  |
|   | If last known address is unknown, enter 'unknown' in the country field.  |                  |
| Last Known Street Address:  | <input type="text"/>   |                  |
| Last Known City:  | <input type="text"/>   |                  |
| Last Known State:   | <input type="text"/>   |                  |
| Last Known ZIP:   | <input type="text"/>   |                  |
| Last Known Country:   | <input type="text"/>   |                  |
| <input type="button" value="Save"/>   |  |                  |
| <input type="button" value="Cancel/Back to Main Menu Page"/>                                      |  |                  |



To enter an application for reimbursement for a particular student, click on “New Entry” on the “Student Information” screen. An “Enter Student Data” screen appears where you must enter all the applicable information for the particular student:

- The student’s last name
- The student’s first name
- The student’s NJ SMART ID
- Whether or not the student is special education
- The student’s birth date
- The student’s grade for school year 2015-16
- Is this a domestic violence placement?
- Is this domestic violence placement from out of state?
- The domestic violence Initial placement date
- Select the particular domestic violence facility (if applicable)
- The current street address, current city, current state and current zip
- Was the student Placed and Paid by Department of Children and Families?
- Does the student receive homeless services?
- When did the child become homeless?
- When did the child moved in to the district?
- The name of the school attended for the 2015-16 school year
- The attendance start date for the 2015-16 school year
- The attendance finish date for the 2015-16 school year
- The number of days claimed for school year 2015-16
- The tuition amount requested (for district informational purposes only)
- The name of the child’s parent/guardian
- Has the student ever resided in New Jersey?
- Has the student lived out of state for fewer than 12 consecutive months since leaving New Jersey?
- While out of state did the parent/guardian own or rent a home where they lived?
- Previous New Jersey Address prior to moving Out of State
- The student’s last known address prior to becoming homeless or moving to a domestic violence shelter

After completing the application for a particular student, click on “Save” to keep that application for submission to the DOE.

If after entering the data for a particular student you decide you do not want to keep this application, click on “Cancel” which takes you back to the main menu.

## Note

Please note that Student Data form is updated. The following data entry fields are added.

- 'Student Initial Enrollment Date in District' is updated as **Date moved in to District**.
- **Domestic Violence Out of State:**  
If the Student is a domestic violence victim and coming from out of state then select "yes" for Domestic Violence Out of State. This is an optional data entry selection.
- **Placed and Paid by Department of Children and Families:**  
Select "yes" if the tuition was previously paid by Department of Children and Families. If your district receives tuition from a different State agency such as the Department of Children and Families you cannot seek reimbursement under the SRHT program. This is a required data entry selection.
- **Receiving Homeless Services:**  
Select "yes", if the district is providing homeless services to the student as per the *McKinney-Vento Homeless Education Assistance Act*. This is a required data entry selection.
- **When did the child become homeless:**  
Enter the date when the child became homeless. This is a required data entry field.
- **Has the Student ever resided in New Jersey:**  
If the student's last district of residence is in New Jersey then the student is not eligible for this program and your district should bill the last district of residence for tuition reimbursement.

If the student's parent/guardian owns or rents a home where they lived out of state or lived out of state for at least 12 consecutive months after leaving New Jersey, then the student did not establish last district of residence in New Jersey. Complete the following data entry selection items based on the above.

- **Has the student lived out of state for fewer than 12 consecutive months since leaving New Jersey:**  
Select Yes or No
- **While out of state did the parent/guardian own or rent a home where they lived:**  
Select Yes or No
- **Previous Address prior to Out of State:**  
Enter the prior residence in New Jersey if the parent/guardian did not own or rent a home while out of state.

## Update Student Information

| <b>Update Student Data</b>  |  |
|---|--|
| District Name: xxxxxxxxxxxxxx   | County ID: xx  |
| The current date and time is xxxxxxxxxxxxxxxxxxxx   |  |
| Student Last Name:  | <input type="text" value="Dow"/>   |
| Student First Name:   | <input type="text" value="Gray"/>  |
| NJ SMART ID:  | <input type="text" value="277775555"/>   |
| Special Ed:   | <input checked="" type="radio"/> Yes <input type="radio"/> No  |
| Student Birth Date:   | <input type="text" value="05/04/2010"/> (mm/dd/yyyy)   |
| Student Grade:  | <input type="radio"/> Pre-Kindergarten <input type="radio"/> Kindergarten <input checked="" type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/> 4th <input type="radio"/> 5th <input type="radio"/> 6th <input type="radio"/> 7th <input type="radio"/> 8th <input type="radio"/> 9th <input type="radio"/> 10th <input type="radio"/> 11th <input type="radio"/> 12th <input type="radio"/> Ungraded |
| Domestic Violence Placement:  | <input type="radio"/> Yes <input checked="" type="radio"/> No  |
| Domestic Violence Initial Placement Date:   | <input type="text"/> (mm/dd/yyyy)  |
| Domestic Violence Out of State:   | <input type="radio"/> Yes <input checked="" type="radio"/> No  |
| Current Domestic Violence Facility Name:  | <input type="text" value="Pick a Facility"/>   |
| Current Street Address:   | <input type="text" value="22 Jill Ct"/>  |
| Current City:   | <input type="text" value="Monmouth Jct"/>  |
| Current State:  | <input type="text" value="NJ"/>  |
| Current ZIP:  | <input type="text" value="08832"/>   |
| Placed and Paid by Department of Children and Families:   | <input type="radio"/> Yes <input checked="" type="radio"/> No  |
| Receiving Homeless Services:  | <input checked="" type="radio"/> Yes <input type="radio"/> No  |
| When did the child become homeless:   | <input type="text" value="10/10/2014"/> (mm/dd/yyyy)   |
| Date moved in to District:  | <input type="text" value="10/10/2014"/> (mm/dd/yyyy)   |
| School Attended for school year 2015-16:  | <input type="text" value="Test"/>  |
| Student Attendance Start Date for school year 2015-16:  | <input type="text" value="07/07/2015"/> (mm/dd/yyyy)   |
| Student Attendance Finish Date for school year 2015-16:   | <input type="text" value="07/20/2015"/> (mm/dd/yyyy)   |
| No. of Days Claimed 2015-16:  | <input type="text" value="13"/> (No decimal)   |
| Amount Requested:   | <input type="text" value="\$3300"/> (No decimal)   |
| Parent/Guardian Name:   | <input type="text" value="DOW GILL"/>  |
| Has the student ever resided in New Jersey:   | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown  |
| Has the student lived out of state for fewer than 12 consecutive months since leaving New Jersey: | <input checked="" type="radio"/> Yes <input type="radio"/> No  |
| While out of state did the parent/guardian own or rent a home where they lived:                   | <input type="radio"/> Yes <input checked="" type="radio"/> No  |
| Previous New Jersey Address prior to Out of State:  | City: <input type="text" value="Dayton"/> State: <input type="text" value="NJ"/>   |
| If last known address is unknown, enter 'unknown' in the country field.                           |  |
| Last Known Street Address:  | <input type="text"/>   |
| Last Known City:  | <input type="text"/>   |
| Last Known State:   | <input type="text" value="PA"/>  |
| Last Known ZIP:   | <input type="text"/>   |
| Last Known Country:   | <input type="text"/>   |
| For Department of Education Use Only  |  |
| Review Status:  | <input type="radio"/> Pending <input type="radio"/> Deny <input type="radio"/> Review Complete   |
| Review Date:  | <input type="text"/> (mm/dd/yyyy)  |
| Reason:   | <input type="text"/>   |
| <input type="button" value="Save"/> <input type="button" value="Delete"/>                         |  |
| <input type="button" value="Back to Main Menu Page"/>   |  |

## Certification

After a district has completed an application for each eligible student and determining that all the entered data is correct, the district must certify the applications as shown in the following screen:

| Certification  |                                 |                    |
|--|---------------------------------|--------------------|
| County ID: xx  | District Name: xxxxxxxxxxxxxxxx | District ID: xxxxx |
| The current date and time is xxxxxxxxxxxxxxxxxxxx  |                                 |                    |
| Certified date:  |                                 |                    |
| <b>In accordance with N.J.S.A. 18A:7B-12(d) and N.J.A.C. 6A:17-2.9 (c), I certify that the foregoing information is true and complete to the best of my knowledge and belief, and understand that any willfully false information is sufficient cause for the rejection of this application or, if reimbursement has been awarded, for the repayment of the funds. I further agree that I will comply with all reasonable and necessary requests for revision or amendment to the application.</b> |                                 |                    |
| Enter the Person's name who authorized this certification:   |                                 |                    |
| <input type="text"/>   |                                 |                    |
| Enter the Person's title who authorized this certification:  |                                 |                    |
| <input type="text"/>   |                                 |                    |
| <input type="button" value="Certify and Submit"/>  |                                 |                    |
| <b>Note: If, after you have certified and submitted, you re-enter or change the data (and click on the Save button), you must re-certify and submit through the certification page.</b>  |                                 |                    |
| <input type="button" value="Cancel/Back to Main Menu Page"/>   |                                 |                    |

## Certification Confirmation

Once the application has been certified, a screen appears stating that your data has been certified. If you subsequently go back into the application to add any new student applications, change any existing student applications, or delete any student applications, then you must certify again when you are finished.

| Certified! Thank you!   |               |                    |
|---|---------------|--------------------|
| District Name: xxxxxxxxxxxxxxxx   | County ID: xx | District ID: xxxxx |
| The current date and time is xxxxxxxxxxxxxxxxxxxx   |               |                    |
| <b>You have successfully certified your request on xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx . Please print this Certification page and the Student Listing page for your records.</b> |               |                    |
| <b>If you add, delete, or modify existing data, you must certify your report again.</b>   |               |                    |
| <input type="button" value="Student Listing"/>  |               |                    |
| <input type="button" value="Cancel/Back to Main Menu Page"/>  |               |                    |

## Frequently Asked Questions

### **How many days can I claim for a homeless child?**

You may claim up to 180 school days that the student is on roll in the district. The maximum reimbursement that the Department of Education will pay for a homeless student during any one school year is equal to the weighted base per-pupil amount calculated pursuant to N.J.S.A. 18A:7F-50 and the appropriate special education and security categorical aids per pupil pursuant to N.J.S.A. 18A:7F-55 and 56. In determining the total reimbursement, the formula assumes a school year of 180 days. We divide the total possible amount of aid by 180 (the minimum school year length) and multiply the result by the number of eligible days on roll up to 180.

### **How do I determine if a homeless student is State responsible?**

The responsibility for educating a homeless student lies with the Last District of Residence (LDR). If the LDR is in the State of New Jersey, then that district should be billed for tuition for the homeless student. If the LDR is not in New Jersey, the district educating the child may submit for reimbursement through the State Responsible Homeless Tuition (SRHT) program.

The LDR is the school district which had jurisdiction over the last place where the child's parent(s) or legal guardian(s) had established residency whether or not the student was enrolled in that district. Residency is established by the most recent of the following circumstances:

1. The place where the parent(s) or legal guardian(s) leased or owned a home in which they lived while having any level of custodial rights over the child.
2. The last local school district jurisdiction in which the child maintained an unchanged domicile for more than one consecutive twelve month period.

It is the responsibility of the district to provide proof that the LDR was out of state or could not be determined. If the district has no proof that the LDR was out of state and there is an in-state LDR, then the LDR can be determined and the in-state LDR should be billed for the tuition.

### **Examples:**

1. A student was a resident of "District A", a New Jersey school district, became homeless and was in a temporary situation in "District B", another New Jersey school district. The LDR is District A. The student IS NOT state responsible. District B must bill tuition to District A.
2. A student was a resident of "District A", a New Jersey school district, became homeless and moved out of New Jersey to a home rented or owned by the student's parents. Subsequently, due to hardship, the family was forced to move back to New Jersey to live, temporarily, with friends or family in District B. The establishment of residence out-of-state

means the LDR was outside of New Jersey and student IS state responsible. The District B may submit for reimbursement through the SRHT.

3. A student was a resident of "District A", a New Jersey school district, became homeless and was in a temporary situation in an out-of-state location for less than one calendar year. Subsequently the family was forced to move back to New Jersey to live, temporarily, with friends or family in "District B", another New Jersey school district. The establishment of residence out-of-state did not occur. The student IS NOT state responsible. District B must bill tuition to District A.
4. A student was a resident of "District A", a New Jersey school district, became homeless and moved out of New Jersey to a home rented or owned by the student's parents. Subsequently, due to hardship, the family was forced to move back to New Jersey to live, temporarily, with friends or family in District B. The move occurred on June 1 of the school year prior to the student enrolling in the district. The establishment of residence out-of-state means the LDR was outside of New Jersey and student IS state responsible. District B may submit for reimbursement through the SRHT for days of attendance up to the end of May of the program year.

#### **How do I determine if a victim of domestic violence is State responsible?**

An out of district student placed in a shelter for victims of domestic violence in your district is eligible for tuition reimbursement in the same manner as a homeless child with one difference. Students from outside your district who are housed in Domestic Violence shelters are eligible for tuition reimbursement following their first year of residence in the district until they leave the shelter.

#### **How do I calculate the "Amount Requested" field?**

The "Amount Requested" field is an optional field for the district to track their anticipated revenue. The DOE calculates the amount separately and does not use that field. The actual award will be calculated based on the weighted base per-pupil amount calculated pursuant to N.J.S.A. 18A:7F-50 and the appropriate special education and security categorical aids per pupil pursuant to N.J.S.A. 18A:7F-55 and 56. Your district business office should be able to estimate this amount for you.

#### **Are Transportation Costs Covered?**

No. The SRHT program provides tuition equal to the weighted base per-pupil amount calculated pursuant to N.J.S.A. 18A:7F-50 and the appropriate special education and security categorical aids per pupil pursuant to N.J.S.A. 18A:7F-55 and 56 to the school district. No other costs are included through this program.

## **Accounting for Homeless Tuition Reimbursement**

The accounting for refunds, or returns of money on expenditures, is determined by the year in which the original expenditure was incurred. Refunds on current year expenditures are not considered as revenue, but are contra items and are deducted from the corresponding expenditures. Refunds on prior year expenditures are considered unrestricted miscellaneous revenues (A/C XX-1980-000).

## **Questions Regarding Homeless Tuition Reimbursement**

We have set up a dedicated email address for all questions regarding the tuition reimbursement for state responsible students and those students residing in a domestic violence shelter for more than one year. The email address is [SRHT@doe.state.nj.us](mailto:SRHT@doe.state.nj.us)