

McKinney-Vento Homeless Education Program Dispute Resolution Process Parent Notification to Proceed with Dispute Resolution Process

To be completed by the **parent, guardian, caregiver or unaccompanied youth** when an enrollment dispute arises. This information may be shared verbally with the district's local homeless liaison as an alternative to completing this form.

Date:	School Site:	
Student(s):		Grade:
Person completin	ing form:	
Relationship to s	student(s):	
I may be contacted	cted at (phone and/or e-mail):	
I wish to appeal t	I the enrollment decision made by:	
	l that parent/guardian chooses child to be immediately enrolle ved:	
	ol of origin*? Yes No ch school was the student transferred? means the school that the child attended when permanently housed or the s	school in which the child was last enrolled.
I have been provi	vided with (please <i>initial</i> all that apply):	
	A written explanation of the school's decision	
	The contact information of the school district's local McH	Kinney-Vento liaison
	A copy of the District's dispute resolution process for stu	idents experiencing homelessness
or you may provid	nplaint/explanation: (Optional: You may include a written explanation verbally by contacting the district's homeless	liaison at (714) 870-2872 or (714) 870-2838.)
The school provi	vided me with a copy of this form when I submitted it. \Box	Yes 🗌 No
Signature of pare	rent/guardian:	Date:
Date received at	t site: Received by:	
This form must b	be forwarded to the district's local homeless liaison as exped	litiously as possible.
Original to	o District McKinney-Vento Liaison Copies to: Pa	rent/Guardian School Site