****

**Greene County Schools**

**Education of Homeless Children and Youth**

**District-Level Dispute Resolution Process Policy**

The *Every Student Succeeds Act of 2015* andthe *McKinney-Vento Homeless Assistance Act* acknowledge that disputes may arise between the school district and homeless students/parents/ guardians when the student is denied enrollment in school or is placed in a school other than the one requested by students/parents/guardians. The purpose of the *McKinney-Vento Homeless Assistance Act* is to ensure that homeless students enroll in school immediately and continue their education with as little disruption as possible. The Greene County Schools’ dispute resolution process follows the guidelines set forth in the McKinney-Vento Homeless Assistance Act. This bulletin contains detailed procedures established for resolving complaints filed against the Department of Education or a local education agency (LEA) pursuant to provisions from *Every Student Succeeds Act* and the *McKinney-Vento Homeless Assistance Act*.

The following process will be used in a case where a dispute occurs regarding the education of a homeless child or youth.

**Dispute Resolution Process**

If a dispute arises over school selection or enrollment, the child/youth must be immediately enrolled in the school in which he/she is seeking enrollment, pending the resolution of the dispute (five days). The dispute process may be initiated by the parent/guardian, unaccompanied youth, principal or other school officials. At this time, the registrar must provide the student/parent/guardian with a copy of the District-Level Dispute Resolution Process Policy.

The parent/guardian or unaccompanied youth must also be:

1. referred to the Homeless Liaison;
2. provided a written explanation of the school’s decision to deny enrollment or school selection (**Form 1**);
3. informed of their right to dispute the school decision **(Form 2**); and
4. provided with Greene County Schools’ McKinney-Vento Homeless Plan.

The child, parent, guardian, or other accompanying adult who wishes to appeal an adverse decision must start the appeal process by submitting a request for dispute resolution to the District Homeless Liaison (**Form 2**). Upon submission of a request for dispute resolution, the Liaison will:

1. Confirm that the child has received the opportunity to immediately enroll in the district school in which enrollment is sought, pending resolution of the appeal; and
2. Expeditiously resolve the appeal according to the following dispute resolution procedures:
3. The Liaison will set up an appointment with the person initiating the dispute within five (5) working days of receiving the notice of dispute. The Liaison will listen to the person’s account of the problem, review information from the school, and consider the law and what factors impact the best interest of the child.
4. The Liaison will provide within five (5) working days:
5. A written explanation of the decision regarding school selection or enrollment (Form 3); and
6. Notice of the right to appeal the Liaison’s decision to the State Homeless Education Coordinator, and the form with which to initiate such appeal. (Form 4)

If the district’s Homeless Liaison denies a school selection or enrollment request that is based upon the rights of the child under the McKinney-Vento Act, the Liaison will provide to the child, parent, guardian, or other accompanying adult, in writing, the reason for the decision and notice that the decision may be appealed. This notice will advise the child, parent, guardian, or other accompanying adult that the child will be immediately admitted to the school in which enrollment is sought and transportation will be provided, pending resolution of the appeal.

For further information on the McKinney-Vento Act and resources for implementation, call the NCHE Help Line at 800-308-2145 or e-mail homeless@serve.org

Local Contact Information

Charlayne’ J. Riley, District *Homeless Liaison*

Greene County Schools

220 Main Street

Eutaw, Alabama 35463

205.372.319

cjordan@greene.k12.al.us

**Homeless Dispute Resolution Revised January 2024**

Form 1

****

**Greene County Schools**

**Education of Homeless Children and Youth**

**Written Notification of Enrollment Decision by School**

This form is to be completed **by the principal** when an enrollment request is denied.

Person completing form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School from which student is being denied enrollment: \_\_\_\_\_\_\_\_\_\_\_\_

In compliance with Section 722(g)(3)(E) of the McKinney-Vento Homeless Education Assistance Act of 2001, the following written notification is provided to:

Parent or Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After reviewing your request to enroll the student(s) listed above, the enrollment request is denied based upon the following: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I have provided a copy of our district’s Dispute Resolution Process Policy concerning enrollment for students experiencing homelessness.
* I have provided a copy of Form 2 – Request for District-Level Dispute Resolution.

Principal’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You have the right to appeal this decision by completing the attached appeal form (Form 2) (or) by contacting the Greene County Schools Homeless Liaison:

**District Contact Information**

Charlayne’ J. Riley, *Homeless Liaison*

Greene County Schools

220 Main Street

Eutaw, Alabama 35462

cjordan@greene.k12.al.us

Form 2

****

**Greene County Schools**

**Education of Homeless Children and Youth**

**Request for District-Level Dispute Resolution**

This form is to be completed by the parent, guardian, caretaker, or unaccompanied youth to appeal the decision of the school when an enrollment request is denied. It should be forwarded to the District Homeless Liaison within 24 hours.

Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Person Initiating Dispute: (please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Student was denied enrollment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I wish to appeal the enrollment decision made by the school.

**I have been provided with: (check all that apply)**

* A written explanation of the school’s decision (Form 1). Please submit a copy of Form 1.
* Contact information for the district Homeless Liaison.

Please return this completed form to:

**District Contact Information**

Charlayne’ J. Riley, *Homeless Liaison*

Greene County Schools

220 Main Street

Eutaw, Alabama 35462

205.372.3109

cjordan@greene.k12.al.us

* A copy of the District-Level Dispute Resolution Process Policy concerning enrollment for students experiencing homelessness.
* I have included a written explanation to support my appeal. (Optional)

Signature of Person Completing Form\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

***To be completed by the Homeless Liaison***

Was shelved?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form 3

****

**Greene County Schools**

**Education of Homeless Children and Youth**

**District Resolution of Complaint**

This form is to be completed by the District Homeless Liaison to outline for the parent, guardian, caretaker, or unaccompanied youth what action was taken to resolve the complaint made against the school for denying enrollment. A copy should be provided to the person initiating the dispute and to the school in question within 5 days of receipt of complaint.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person Initiating Dispute: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**District Action on Complaint**

Action taken within \_\_\_\_\_\_\_\_\_\_\_\_ days after receiving notice of the complaint.

Did the Homeless Liaison resolve this dispute? Yes No

If the dispute was resolved, describe the actions taken by the Homeless Liaison to resolve the dispute to the satisfaction of the parent/guardian:

If the dispute was not resolved to the satisfaction of the parent/guardian, provide the date that the District Homeless Liaison convened a meeting of the parties and briefly describe the outcome of this meeting:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Homeless Liaison Date

**Notice to Appeal**

You have the right to appeal the decision of the District Homeless Liaison using Form 4. The student will be immediately admitted to the school in which enrollment is sought and transportation will be provided pending resolution of the appeal.

Form 4

 **Alabama Department of Education State-Level Letter of Appeal**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Re: Homeless Dispute for Greene County Schools

Alabama Department of Education Homeless Coordinator

Federal Programs

Montgomery, Alabama 36130-2101

Dear State Homeless Coordinator:

My name is\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. My child(ren) attend school at

 (Please print)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Alabama.

 (Name of School) (Name of City/Town)

I need your help with the following problem(s). I have checked the box that fits my situation. I have included a brief statement in the space provided.

* The School District would not enroll my child (children). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Child(ren) couldn’t begin school because they didn’t have all their medical and/or school records. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Child(ren) not permitted to stay in their current school. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Special Education testing/placement services were denied or unavailable. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* School District will not provide transportation to stay in the current school. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have written on the reverse side what has already been done to help me. (Optional)

Please call me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Or, you can write to me at\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature