

Instruction

Education For Homeless Children

E2 - 6173

DISPUTE FORM

Instructions: This form is to be completed by a parent/guardian or student when a dispute regarding enrollment has arisen. As an alternative to completing this form, the information on this form may be shared verbally with the district's liaison for homeless students.

Date submitted: _____
Student's name: _____
Name of person completing form: _____
Relation to student: _____
Address: _____
Email address: _____
Phone number: _____

Name of school requested: _____

I wish to appeal the eligibility, school selection, or enrollment decision made by:
__ District liaison __ District Superintendent __ County office of education liaison

Reason for the appeal: You may include an explanation to support your appeal in this space or provide your explanation verbally.

- I have been provided with:
- A written explanation of the district's decision
 - Contact information for the district's homeless liaison
 - Contact information for the county office of education's homeless liaison
 - Contact information for the state homeless coordinator
 - A copy of this dispute form

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