

Homeless Eligibility or School Placement Appeal Request

To be completed by the parent, guardian or unaccompanied youth when a dispute arises regarding eligibility for homeless services or school placement. This information may also be shared verbally with the school counselor or principal who will then complete the form on behalf of the parent, guardian or student, if an unaccompanied youth.

Name of student(s):
Name of school(s), to which enrollment is denied:
I wish to appeal the eligibility/school placement decision.
Written explanation to support appeal:
I have been provided with (please initial all that apply):
Written notification, including explanation, of the school's decision.
The contact information of the district's homeless education liaison.
A copy of the district's dispute resolution process.
Name of the person completing form:
Relationship to student(s): Date:
All the information on this form is true and accurate to the best of my knowledge.
Parent, guardian/or unaccompanied youth signature:
I may be contacted at:
Phone: Alternate Phone:
E-Mail:
The school provided me with a copy of this form when I submitted it. (initial)