WRITTEN NOTIFICATION FORM

This form should be completed by a school administrator or Homeless Liaison when the parent's/guardian's request to return to the school of origin is denied. Fax completed form to the HEP office at 724-445-2776 and give original to the parent/guardian along with Dispute Resolution Form.

Date: _____ School: _____

Name and Title of Person Completing Form: _____

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

Parent/Guardian: _____

Student(s): _____

After reviewing your request to enroll the student(s) listed above, the enrollment request is denied. This determination was based upon:

Please have parent/guardian sign and date below to indicate that they received a copy of this form.

_____ _____
Parent/Guardian Signature Date

- You have the right to appeal this decision by completing the attached Dispute Resolution Form or provide your explanation verbally to the district's Homeless Liaison: Shane M. Spack at 724-756-2030.
    - Resolution by the Homeless Liaison will be made within 7 business days of receipt of Dispute Resolution Form.
    - If the matter is not resolved at that level, the Superintendent shall issue the District's decision within 10 business days of the second dispute by parent/guardian.
    - If the matter is not resolved at that level, the parent/guardian may appeal this decision by contacting the Pennsylvania Department of Education Homeless Education Coordinator (see contact information below).
- The student listed above has the right to enroll immediately in the requested school, including full participation in all school activities pending resolution of the dispute.
- You may contact the state coordinator if further help is needed:

State Coordinator for Homeless Education
Pennsylvania Department of Education
Office – 717-783-6466

You may seek the assistance of advocates or attorneys.