



Orange Unified School District
McKinney-Vento Homeless Assistance Act Dispute Resolution Process
Written Notification of Enrollment Decision

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

Date: _____

Student: _____ Grade: _____

Person completing form: _____

Relation to student: _____

I may be contacted at (phone or e-mail): _____

I wish to appeal the enrollment decision made by: _____

Name of school that parent/guardian/complaining party chooses child to be immediately enrolled in and/or transported to/from until dispute is resolved: _____

Is this the school of origin*? Yes No

**School of Origin means the school that the child attended when permanently housed or the school in which the child was last enrolled.*

If no, from which school was the student transferred? _____

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

_____ A written explanation of the school's decision

_____ The contact information of the school district's local homeless education liaison.

_____ A copy of the state's dispute resolution process for students experience homelessness

Reason for complaint: (Optional: You may include a written explanation in the space below to support your appeal or you may provide your explanation verbally by contacting the district's local homeless liaison at _____).

Signature of parent/guardian/complaining party: _____ Date: _____

The school provided me with a copy of this form when I submitted it. _____ (Please initial)

Date received at site: _____ Received by: _____

This form must be forwarded to the district's local homeless liaison within 2 working days.

Copies to: _____ Parent _____ District's local homeless liaison _____ Site binder