



**McKinney Vento Homeless Assistance Act  
Dispute Resolution Form**

**STUDENT INFORMATION**

<b>Parent/Guardian/Unaccompanied Youth Name</b>	<b>Phone</b>	
<b>Student Name</b>	<b>Birth Date</b>	<b>Grade</b>

**SCHOOL INFORMATION**

<b>School Name</b>	<b>Homeless Liaison Name/Title</b>	
<b>Email</b>	<b>Phone</b>	<b>Date of Dispute Submission</b>

**PARENT/GUARDIAN/UNACCOMPANIED YOUTH STATEMENT**

<b>Please explain why you are requesting review of the decision and requested action.</b>

**ACKNOWLEDGMENT**

I understand that under the McKinney-Vento Homeless Assistance Act:

- My child has the right to be immediately enrolled in the school I request while this dispute is being resolved.
- I have the right to appeal the school's decision through the school/district and, if necessary, to the Georgia Department of Education.
- I will be contacted with updates and a final decision within required timelines.

Parent/Guardian/Unaccompanied Youth: \_\_\_\_\_ Date \_\_\_\_\_

**FOR SCHOOL USE ONLY**

<b>Received By</b>	
<b>Date Received</b>	
<b>Appeal Routed To</b>	