**Trout Creek School District**

 Adopted on:

 Reviewed on:

3125F STUDENTS Revised on:

**MCKINNEY-VENTO HOMELESS EDUCATION ASSISTANCE**

**DISPUTE RESOLUTION FORM**

School District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Liaison \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of first contact by homeless individual, guardian, or representative \_\_\_\_\_\_\_\_\_\_\_\_

Homeless Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe the issue(s) in question \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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School District Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Superintendent/Principal)

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (within 7 business days)

 Resolution of Liaison/School District Level *(describe below)* \_\_\_\_ or

 Forwarded to OPI Homeless Coordinator *[please contact at (406) 444-2036)* \_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (within 15 business days)

 Resolution to OPI Homeless Coordinator Level *(describe below)* \_\_\_\_ or

 Forwarded to Superintendent of Public Instruction \_\_\_\_

Describe Resolution Results \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Homeless Coordinator Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form must be filed with Heather Denny

 Homeless Coordinator

 Office of Public Instruction

 Po Box 202501

 Helena, MT 59620-2501