**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