



**RECEIPT OF DISPUTE RESOLUTION INFORMATION**  
Homeless Education Program

Date: \_\_\_\_\_

I, \_\_\_\_\_, (parent/guardian/unaccompanied youth) am requesting enrollment for my student(s) or myself in the following school(s):

Student(s):

School(s):

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I have received the explanation of my student's enrollment. I have also received the following:

1. Contact information for the district's Homeless Liaison and the Office of the Superintendent of