Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click Print button.

Illinois
State Board of
Education
100 North First Street, E-222
Springfield, Illinois 62777-0001

MCKINNEY-VENTO HOMELESS EDUCATION DISPUTE RESOLUTION - DISTRICT LEVEL

WELLNESS DEPARTMENT

STUDENT NAME	GRADE LEVEL	STUDENT ID NUMBER
SCHOOL NAME	SCHOOL DISTRICT NAME AND NUMBER	

District action taken within _____ (# of days) school days on _____ (Date Action Taken) after receiving notice of the complaint on _____ (Date Complaint Received).

Did the Homeless Education Liaison resolve this dispute? ☐ Yes ☐ No

If the dispute was resolved, describe the actions taken by the liaison to resolve the dispute to the satisfaction of the parent/guardian.

If the dispute was not resolved to the satisfaction of the parent/guardian, provide the date that a District Education Officer convened a meeting of the parties and briefly describe the outcome of this meeting.

Was the parent/guardian provided with a list of organizations providing low-cost or free legal assistance for dispute resolution hearings? If yes, please attach provided list.

Action taken by the School District to resolve the dispute, if necessary:

Was the dispute finally resolved? ☐ Yes ☐ No Date resolved: _____

Explanation:

Print Reset Form