New Mexico Public Education Department Students Experiencing Homelessness or Unaccompanied Youth Dispute Resolution Form

(This form should be used for the dispute resolution process for students experiencing homelessness or unaccompanied youth in regards to eligibility, school selection, enrollment or transportation.

Note: LEAs/State Charter Schools with unresolved disputes shall forward this form along with the LEA's/State Charter School's written explanation of the school's decision to the Public Education Department's homeless liaison within five calendar days of the LEA's final decision. The filing of these documents shall be deemed to satisfy the requirements of paragraphs 1 through 4 of Subsection A of 6.10.3.8 NMAC.

Date: _____

Please complete all information and mail to: New Mexico Public Education Department Student Success and Wellness Bureau Mc-Kinney Vento State Director 120 South Federal Place, Room 206 Santa Fe, NM 87501

II.

I. School District or State Charter School Information:

a. School district or state charter school serving the student:

b. Name of the school district or state charter school point of contact for students experiencing homelessness:

c. Name of the school where the student is currently enrolled or has been enrolled most recently:

d. Other district and/or school staff who have been made aware of the dispute

Name		Phone	Email	
Name		Phone	Email	
Name		Phone	Email	
nformation	Regarding the Person(s) Requesting	Dispute Resolution :		
a.	Person(s) Name(s):			
	Relationship to Student: I am the unaccompanied youth Parent Advocate Other:			
	Address (or available contact informat	• 、		

	d. Phone number(s):				
	Home	Work			
	Cell	Email:			
III.	Student Information				
	If the dispute is regardin following information:	g a student experiencing homelessness or unaccompanied youth, please provide the			
	a. Student's Full Name	e:			
	b. Student's Date of B	irth:			
	c. Student's Address (or available contact information):			
	d. School Student Curr	rently Attends:			
IV.	Representative Information (optional)				
	a. Are you using anoth	her personnel to assist you in resolving this dispute:			
	Attorney O	Other Representative			
	b. If using any of the a	bove, please identify:			
	Name:	Title:			
	Address:				
	Phone number(s):				
	Work				
	Cell	Fax			
V.	Details Concerning the	Dispute:			
	a. Is this dispute in ref Eligibility School Sele Enrollment Transporta Other	ection t in school of origin			

b. Which school, school district, department, agency or consortium of agencies is the dispute with?

	Please describe the dispute with the school district or state charter. (Who? What? Where? Why?) <i>Attach</i> a <i>documents that support your position</i> .				
E	Efforts Made to Resolve the Dispute				
th	utcome of efforts made at the local level to resolve the dispute: Describe the attempts that have been made by e District/Charter School to resolve the dispute. Attach documentation including meeting minutes, emails, none calls, etc.				
th pl 	e District/Charter School to resolve the dispute. Attach documentation including meeting minutes, emails,				
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Signature of Party or Designated Representative

Date