



Continuum of Care - Integrated Support Services: Homeless Protocol & Policy

This plan is intended to adhere to the provisions of the McKinney-Vento Homeless Assistance Act and ensure that each child of a homeless individual and each homeless youth has equal access to the same free, appropriate public education as provided to other children and youths.

I. Definition of a “Homeless Student”:

The McKinney-Vento Homeless Assistance Act defines “homeless” as follows: the term homeless children and youth means individuals who lack a fixed, regular, and adequate nighttime residence, including but not limited to:

- a. Primary nighttime residence that is a shelter designated to provide temporary living accommodations including, but not limited to, motels/hotels, family shelters, domestic violence shelters, congregate shelters, and transitional housing.
- b. Living in a car, park, abandoned building, garage, substandard housing, or other public or private places not designed for, or ordinarily used as a regular sleeping accommodation, for human beings.
- c. Temporarily living in a trailer park or camping area with his/her family, because of a lack of adequate living accommodations.
- d. Living “doubled –up”. These are children and youth who are temporarily sharing the housing of other families due to loss of housing, stemming from financial problems (e.g., loss of job, eviction, or natural disaster). *Families who share housing due to cultural preferences or convenience would not be considered homeless.*
- e. Youth abandoned at a hospital.
- f. Residing in a home for unwed mothers as a school-aged, unwed mother, or mother-to-be, if there are no other available living accommodations.
- g. Awaiting foster care in limited circumstances (e.g., does not include placement in kinship care, foster family, foster family agency, or group home).
- h. Placed by the state in an emergency shelter because there was no other place.
- i. Abandoned, runaway, or pushed out youth or a migratory child living in circumstances as described above. *Unaccompanied youth* are defined as youth who are not in the physical custody of a parent, guardian or caregiver and includes youth who have run away from home, have been told to leave, or pregnant or parenting teens not living with their parent or guardian. A child or unaccompanied youth will be considered homeless for as long as he/she is in a living situation described above.

II. General Assurance

Camino Nuevo will ensure homeless youth, unaccompanied minors and other specialized students who enroll are provided the support necessary to thrive at Camino Nuevo. Once identified, Camino Nuevo will work to connect them and/or



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their families with resources such as clothing, transportation access, and identified services.

Homeless youth will be provided services comparable to those received by other students in the school, and those education programs which students meet eligibility criteria, such as services provided under Title I or similar state and local programs; programs for students with disabilities; programs for students with limited English proficiency; gifted and talented programs; and school nutrition program.

CNCA will provide homeless students with access to education and other services necessary for these students to meet the same challenging academic standards as other students.

III. Identification and Reporting

Homeless children and youth will be identified through:

- a. The application process for enrollment (self-identification and reporting)
- b. School personnel recommendations

IV. Enrollment and Records

Immediate enrollment means on the spot or at the time the student or family is present in the school office. The family should not be told to return on another day or at another time. Enrollment means that the student is attending classes and participating in all school activities.

Homeless and unaccompanied youth are enrolled, if space is available, regardless of the availability of school records, immunization records*, or school uniforms.

**Note: Schools may refer youth to the LAUSD Student Enrollment & Placement Assessment (SEPA) Center to get the vaccines needed free of charge.*

Unaccompanied homeless youth have a right to enroll in school without a parent, guardian or caregiver. In situations where a student is a homeless unaccompanied youth, and the school has determined the child is mature enough to consent to disclosure of pupil record information, the student may authorize disclosure in accordance with the Family Educational Rights and Privacy Act (FERPA).

If the student becomes permanently housed during the academic year, the student is entitled to stay in the school of origin for the remainder of that academic year.

A homeless student will be provided equal access to enroll in any educational program for which eligibility requirements are met. Homeless children and youth will have access to necessary educational and support services that will afford them the opportunity to meet



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the same challenging State academic student achievement standards as all students. Students will be provided with services and programs comparable to the ones offered to other students in the Camino Nuevo Charter Academy schools.

Confidentiality: A student's residency status, like all school records, will be kept confidential.

V. Enrollment Protocol

After identification as homeless, the school will immediately enroll the student in school, even if records normally required for enrollment are lacking (e.g., academic records, special education records, proof of residency, medical records and/or immunizations).

- a. Every student must be enrolled immediately.
- b. The enrolling school will immediately contact the last school of attendance to obtain academic, health and other relevant records that are lacking at the time of enrollment.
- c. As required for all students, an emergency contact form must be completed.
- d. A thirty (30) day conditional enrollment is to be granted if immunization records are not available at the time of enrollment; including the Tdap requirement. The school nurse will follow up every thirty (30) days until the immunization record is completed and the student continues to attend school. Enrollment MUST NOT be delayed, even if documents normally required for enrollment are lacking.
- e. If homeless families do not have appropriate documentation forms, school staff is to provide alternative forms such as: (for additional forms refer to BUL 4926.2)
 - i. Affidavit of Temporary Residence (Attachment A)
 - ii. Affidavit for Proof of Age of Minor (Attachment B)
 - iii. Affidavit of Parent/Legal Guardian Identification (Attachment C)
 - iv. Caregiver Authorization Affidavit (Attachment D)
- f. Any of the alternative forms listed may be used to permit students to transfer schools in order to participate in athletic or other extracurricular activities.
- g. If a homeless student was receiving accommodations under Section 504 but does not bring a current 504 plan to the school, the school is obligated to immediately enroll that student and provide the required accommodations.
- h. After enrollment is complete if services are requested, homeless students will be referred to school site Student and Family Services Coordinator or Parent Liaison.

VI. Eligibility of Free and Reduced Lunch Program

All students who meet the federal definition of homelessness are automatically eligible for the USDA free nutrition program and are not required to submit a meal application. This eligibility must be reviewed annually.

VII. Transportation Assistance

The school will ensure that transportation is provided, at the request of the parent, guardian or homeless youth, to and from the school of origin, if the student is eligible. Eligible



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students and families will be provided with tokens or a pass from the local public transit agency.

Homeless students residing within their school's residence boundaries are not eligible for transportation assistance.

Transportation assistance will not be provided for longer commute (more than 90 minutes each way) due to feasibility and the best interest of the child.

Students 12 years of age and under cannot ride alone on a public transit. Guardians or parents of transportation eligible students under 12 years of age will be provided with transportation services until the student turns 12.

A parent/guardian or designated adult must ride with student's age 11 and younger to and from school each day, and sign in daily to continue to receive transportation assistance.

VIII. Homeless Liaison:

Every school principal will designate a School Site Homeless Liaison to ensure the implementation of the policy. Responsibilities must include:

- a. Ensure notification of the educational rights of homeless students is disseminated where children and youth receive services.
- b. Ensure that homeless student information is updated throughout the year.
- c. Ensure homeless students have access to any supplemental instructional and support services.
- d. Advocate and support as needed to ensure that homeless students are placed in the appropriate classroom to facilitate academic growth and success.
- e. Assist unaccompanied homeless youth with referrals to school based educational programs and/or support services as well as community resources. Families, children and youth receive educational services for which they are eligible, including referrals to health, mental health, dental and other appropriate centers.
- f. Ensure that families are informed of educational and related opportunities available to their children and are provided with meaningful opportunities to participate in the education of their children.

The local liaison, designated by the Home Support Office, must ensure:

- g. Training and technical assistance is provided as appropriate.
- h. Collaboration with county and state homeless liaisons.
- i. Provide technical assistance regarding the proper identification, enrollment and services needs of homeless students and families.
- j. Conduct professional development trainings for school personnel regarding the rights and responsibilities of the homeless population.
- k. Students are enrolled in, and have full and equal opportunity to succeed in school



- I. Enrollment disputes are mediated in accordance with the Enrollment Disputes section of McKinney-Vento.

Liaison at the Home Support Office: Zulma Suro, Director of Whole Child, (213) 417-3407

IX. Enrollment Dispute Resolution Process

If a dispute arises over school selection or enrollment, the student must be immediately enrolled in the school in which he/she is requesting enrollment, pending the resolution of the dispute.

The school must refer the student, parent, or guardian to the site homeless liaison to carry out the dispute resolution process as expeditiously as possible. The site homeless liaison must ensure the dispute resolution process is also followed for unaccompanied youth.

A written explanation (see attachment E) of the school's decision regarding school selection or enrollment must be provided if a parent, guardian, or unaccompanied youth disputes such a school selection or enrollment decision, including the right to appeal. The written explanation will be complete, as brief as possible, simply stated, and provided in a language that the parent, guardian, or unaccompanied youth can understand.

If the parent or guardian wishes to appeal, they may send a written request (attachment F) to the Camino Nuevo Charter Academy Home Support Office (HSO) asking them to review such decision for compliance with applicable law. Such request must include any documentation related to the dispute resolution proceeding.

The CNCA HSO may request any additional information from either party he or she deems relevant in resolving the issue. The HSO Local Liaison will inform all parties of the final determination. Ongoing, uninterrupted access to all guaranteed services will continue to be provided during the appeals process.

ATTACHMENTS:

- (A) Affidavit of Temporary Residence (English and Spanish)*
- (B) Affidavit for Proof of Age of Minor (English and Spanish)*
- (C) Affidavit of Parent/Legal Guardian Identification (English and Spanish)*
- (D) Caregiver's Authorization Affidavit (English and Spanish)*
- (E) Written Notification of Enrollment Decision (English and Spanish)*
- (F) Parent Dispute Resolution Form (English and Spanish)*



ATTACHMENT A: Affidavit of Temporary Residence (English)

Affidavit of Temporary Residence

I _____ declare as follows:

I am (check one) parent legal guardian caretaker of

Name: First Middle Last DOB

A school age minor who is seeking admission to Camino Nuevo Charter Academy,

School campus

Since _____, our family has not had a permanent address; however, we
Month/year
currently reside at _____ within the
address (if any)
attendance are of _____.
(if applicable)

For school purposes, I can receive mail and maintain regular contact with:

Name : _____ Phone: _____

Address: _____

In case of emergency, please contact:

Name: _____ Phone: _____

Address: _____

I declare under penalty of perjury under the law of California that the above is true and correct and that if called upon testify, I would be competent to testify thereto.

Signature of Parent/Legal Guardian/Caretaker

Date

Witnessed by: _____
Signature of School Administrator or Designee



ATTACHMENT A: Affidavit of Temporary Residence (Spanish)

Declaración Jurada sobre el Domicilio Provisional

Yo _____ declaro lo siguiente:

Yo soy el (marque una respuesta) padre/madre tutor legal encargado de

Nombre _____ Segundo nombre _____ Apellido _____ Fecha de nacimiento _____

De un menor de edad que solicita ingreso a la escuela Camino Nuevo Charter Academy,

_____ Desde _____, nuestra
Plantel (mes/año)

familia no ha tenido un domicilio fijo; sin embargo, actualmente vivimos en

_____ dentro de la zona de asistencia
dirección (si aplica)
escolar de _____ (plantel – si aplica).

Si la escuela desea comunicarse conmigo, puedo recibir correo y me mantengo en contacto regular con:

Nombre: _____ Teléfono: _____

Dirección: _____

En caso de emergencia, por favor comuníquese con:

Nombre: _____ Teléfono: _____

Dirección: _____

Yo declaro bajo pena de falso testimonio, que conforme a lo establecido por las Leyes del Estado de California, que lo anterior es verdadero y correcto, y que si se solicitara que testifique, yo atestiguaría al respeto con competencia.

Firma del Padre/Tutor Legal/Encargado

Fecha

Testigo: _____

Fecha del Administrador o Designado



ATTACHMENT B: Affidavit of Proof of Age of Minor (English)

Affidavit of Proof of Age of Minor

I _____ declare:

I am (check one) parent legal guardian caretaker of

of _____ and hereby affirm that

Name: First Middle Last

he/she was born on _____ in _____,
Month/day/year City

State Province Country

I further affirm that a certificate of birth is not available for said minor. I declare under penalty of perjury under the laws of California that, of my own personal knowledge, the above is true and correct and that if called upon testify, I would be competent to identify thereto.

Name of Parent/Legal Guardian/Caregiver Date

Signature of Parent/Legal Guardian/Caretaker Date

Witnessed by: _____
Signature of School Administrator or Designee



ATTACHMENT B: Affidavit of Proof of Age of Minor (Spanish)

Declaración Jurada para Comprobar la Edad del Menor

Yo _____ declaro

Yo soy el (marque una respuesta) padre/madre tutor legal encargado de

Nombre Segundo nombre Apellido Fecha de nacimiento

Y queda afirmado que él/ella nació en _____ en _____,
Mes/día/año Ciudad

Estado Provincia País

Yo reafirmo que no hay disponible un certificado de nacimiento para el niño mencionado. Yo declaro bajo pena de perjurio, que conforme a las leyes del estado de California, lo anteriormente mencionado es verdadero y correcto, y que si se solicitara que testifique, yo atestiguaría al respecto con competencia.

Nombre del Padre/Tutor Legal/Encargado

Fecha

Firma del Padre/Tutor Legal/Encargado

Fecha

Testigo: _____

Fecha del Administrador o Designado



ATTACHMENT C: Affidavit of Parent/Legal Guardian Identification (English)

Affidavit of Parent/Legal Guardian Identification

I _____ declare as follows:

I am (check one) parent legal guardian caretaker of the following child/children

Name: First Middle Last DOB

A school age minor who is seeking admission to Camino Nuevo Charter Academy

(Campus)

Name: First Middle Last DOB

A school age minor who is seeking admission to Camino Nuevo Charter Academy

(Campus)

Name: First Middle Last DOB

I do not own or possess a birth certificate, driver’s license, state ID, or baptism certificate verifying my status as a parent. I declare under penalty of perjury under the laws of California that the above is true and correct.

Name of Parent/Legal Guardian/Caregiver Date

Signature of Parent/Legal Guardian/Caretaker Date

Witnessed by: _____
Signature of School Administrator or Designee

School personnel: make one copy of signed affidavit per student and place in student’s cumulative record.



ATTACHMENT C: Affidavit of Parent/Legal Guardian Identification (Spanish)

Declaración Jurada de Identificación de los Padres o Tutores Legales

Yo _____ declaro lo siguiente:

Yo soy el (marque una respuesta) padre/madre tutor legal encargado del (los) siguiente(s) niño(s)

Nombre Segundo nombre Apellido Fecha de nacimiento

Un menor de edad que solicita ingreso a la escuela Camino Nuevo Charter Academy,

_____ Plantel

Nombre Segundo nombre Apellido Fecha de nacimiento

Un menor de edad que solicita ingreso a la escuela Camino Nuevo Charter Academy,

_____ Plantel

Nombre Segundo nombre Apellido Fecha de nacimiento

Yo no tengo en mi poder un acta de nacimiento, ni una licencia de conducir, ni un documento de identidad, ni el certificado de bautismo, para verificar la paternidad. Yo declaro, bajo pena de perjurio, que conforme a las leyes del Estado de California, lo antedicho es verdadero y correcto.

Nombre del Padre/Tutor Legal/Encargado Fecha

Firma del Padre/Tutor Legal/Encargado Fecha

Testigo: _____ Fecha del Administrador o Designado

School personnel: make one copy of signed affidavit per student and place in student's cumulative record.



ATTACHMENT D: Caregiver’s Authorization Affidavit (English) – Page 1

Caregiver’s Authorization Affidavit

Use of this affidavit is authorized by Part 1.5 (commencing with Section 6550) of Division 11 of the California Family Code. Instructions: Completion of items 1-4 and the signing of the affidavit is sufficient to authorize enrollment of a minor in school and authorize school-related medical care. Completion of item 5-8 is additionally required to authorize any other medical care. Please print clearly.

The minor named below lives in my home and I am 18 years of age or older.

Name of Minor: _____ Date of Birth: _____

My name (adult giving authorization): _____

My home address: _____
Number, street, Apt #, City, State Zip

I am a grandparent, aunt, uncle or other qualified relative (see back of this form for a definition) of the minor.

Check one or both (for example, if one parent was advised and the other cannot be located):

I have advised the parent/s or other person/s having legal custody of the minor of my intent to authorize medical care, and have received no objection.

I am unable to contact the parent/s or other person/s having legal custody of the minor at this time to notify them of my intended authorization. My date of birth: _____ My driver’s license/ID number: _____

WARNING: Do not sign this form if any of the statements above are incorrect, or else you will be committing a crime punishable by a fine, imprisonment or both.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature _____ Date: _____

Notices:

- *This declaration does not affect the rights of the minor’s parents or legal guardian regarding the care, custody, and control of the minor, and does not mean that the caregiver has legal custody of the minor.
- *A person who relies on this affidavit has no obligation to make any further inquiry or investigation
- *This affidavit is not valid for more than one year after the date on which is executed.



ATTACHMENT D: Caregiver's Authorization Affidavit (English) – Page 2

CAREGIVER'S AUTHORIZATION AFFIDAVIT

TO CAREGIVERS:

1. "Qualified relative," for purposes of item 5, means a spouse, parent, stepparent, brother, sister, uncle, aunt, nephew, first cousin, or any person denoted by the prefix "grand" or "great," or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.
2. The law may require you, if you are not a relative or a currently licensed foster parent to obtain a foster home license in order to care for a minor. If you have any questions, please contact your local department of social services.
3. If the minor stops living with you, you are required to notify any school, health care provider, or health care service plan to which you have given this affidavit.
4. If you do not have the information requested in item 8 (California driver's license or I.D.), provide another form of identification such as your social security number or Medi-Cal number.

TO SCHOOL OFFICIALS:

1. Section 48204 of the Education Code provides that this affidavit constitutes a sufficient basis for a determination of residency of the minor, without the requirement of a guardianship or other custody order, unless the school district determines from actual facts that the minor is not living with the caregiver.
2. The school district may require additional reasonable evidence that the caregiver lives at the address provided in item 4.

TO HEALTH CARE PROVIDERS AND HEALTH CARE SERVICE PLANS:

1. No person who acts in good faith reliance upon a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is subject to criminal liability or to civil liability to any person, or is subject to profession disciplinary action, for such reliance if the applicable portions of the form are completed.
2. This affidavit does not confer dependency for health care coverage purposes.



ATTACHMENT D: **Caregiver's Authorization Affidavit (Spanish) – Page 1**

*Declaración Jurada de la Persona a cargo del Cuidado y la Protección del Alumno
que Firma la Autorización*

La Sección 1.5 (a partir del artículo 6550) de la División 11 del Código de Derecho de Familia autoriza el uso de esta declaración jurada. **Instrucciones:** Completar los artículos 1 al 4 y firmar la declaración jurada es suficiente para autorizar la matriculación del menor de edad en la escuela y para autorizar la atención médica que sea necesario brindarle en la escuela. También es necesario completar los artículos 5 al 8 para autorizar que se le brinde cualquier otro tipo de atención médica. Escriba en letra de imprenta legible.

El menor nombrado a continuación vive en mi hogar y yo tengo 18 años de edad o soy mayor de 18 años.

Nombre del Menor

Fecha de Nacimiento

Mi nombre y apellido (del adulto firmando esta autorización): _____

Mi dirección: _____
Número, calle, apartamento, ciudad, estado, código postal

Soy el abuelo, la tía, el tío u otro pariente calificado del menor de edad (definición de "pariente calificado" en el reverso de este formulario) _____

Marque uno o ambos (por ejemplo, si se le informó a un padre de familia pero no fue posible localizar al otro padre de familia):

Le he informado al padre de familia o a los padres de familia o a la persona que tiene la custodia legal del menor de edad sobre mi intención de autorizar que reciba atención médica y no me han comunicado ningún reparo al respecto.

En este momento no he logrado comunicarme con el padre de familia, los padres de familia o la persona que tiene la custodia legal del menor de edad para informarles que firmaré la autorización.
Mi fecha de nacimiento: _____ Número de licencia de conducir o de identificación: _____

AVISO: No firme este formulario si alguna de las declaraciones anteriores es incorrecta dado que estaría cometiendo un delito punible con una multa, con pena de prisión o ambos.

Declaro bajo pena de falso testimonio conforme a lo establecido por las leyes del Estado de California que lo antedicho es verdadero y correcto.

Firma: _____ Fecha: _____

Notificaciones:

- ✓ Esta declaración no afecta los derechos que los padres o el tutor del menor de edad tienen con respecto al cuidado, la custodia y el control del menor de edad y no significa que la persona a cargo del cuidado y la protección del menor tiene la custodia legal de dicho menor.
- ✓ La persona que se fía de lo antedicho en esta declaración jurada no tiene la obligación de realizar una indagación o investigación ulterior.

Esta Declaración Jurada no es válida después de transcurrido un año a partir de la fecha en que se firmó.

ATTACHMENT D: Caregiver's Authorization Affidavit (Spanish) – Page 2

*Declaración Jurada de la Persona a cargo del Cuidado y la Protección del Alumno
que Firma la Autorización*

PARA TUTORES LEGALES

1. "Pariente calificado," para el propósito de artículo 5, quiere decir cónyuge, padre, padrastro, hermano, hermana, hermanastro, hermanastra, medio hermano, media hermana, tío, tía, sobrino, primo hermano u otra persona que sea abuelo/a, bisabuelo/a o el cónyuge de cualquiera de las personas especificadas en esta definición, aunque el matrimonio haya sido terminado por muerte o disolución.
2. La ley requiere que usted, si no es pariente o un padre de crianza con licencia actual, que obtenga un licencia para cuidado de crianza en su hogar para poder cuidar al menor. Si tiene preguntas, por favor póngase en contacto con el Departamento de Servicios Sociales.
3. Si el menor deja de vivir con usted, se requiere que usted le notifique a la escuela, proveedor de servicios de salud, o el plan de servicios de salud a quienes usted ha entregado este afidávit.
4. Si no tiene la información requerida en el artículo 8, (Licencia de manejar en California o tarjeta de identificación), necesita proveer otra forma de identificación tal como su número de seguro social o número de Medi-Cal.

PARA ADMINISTRADORES DE LA ESCUELA

1. Sección 48204 del Código de Educación provee que este afidávit constituye suficiente base para la determinación de residencia del menor, sin el requisito de tutela u otra orden de custodia, a menos que la escuela determine basado en hechos que el menor no vive con el tutor legal.
2. Puede ser que la escuela necesite más evidencia de que el tutor legal vive en el domicilio provisto en el artículo 4.

PARA PROVEEDORES DE SALUD Y PLANES DE SERVICIO DE SALUD

1. Ninguna persona que actúe de buena fe debe depender de la Declaración Jurada para proveer cuidado médico o dental, sin el conocimiento de hechos contrarios a los declarados en este afidávit, será sujeto a obligación criminal u obligación civil, o es sujeto a acción disciplinaria por tal confianza si las secciones aplicables están completas.
2. Esta Declaración Jurada no confiere dependencia para propósitos de protección.



ATTACHMENT E: **Written Notification of Enrollment Decision (English)**

Written Notification of Enrollment Decision

Date: _____

Person completing form: _____

Title: _____

School Site: _____

In compliance with Section 722(g)(3)(E) of the McKinney-Vento Homeless Education Assistance Act of 2001, the following written notification is provided to:

Parent or Guardian: _____

Student(s): _____

After reviewing your request to enroll the student(s) listed above, the enrollment request is

DENIED **UPHELD**. This determination was based upon:

You have the right to appeal this decision. Please complete the accompanying Dispute Resolution form and contact:

Camino Nuevo Charter Academy, Home Support Office
Attn: Homeless Program Local Liaison
3435 W. Temple Street
Los Angeles, California 90026

- The student(s) has the right to immediately enroll in the school of choice pending resolution of the dispute.
- The parent/guardian or unaccompanied homeless youth may provide written or oral information to support your position.



ATTACHMENT E: **Written Notification of Enrollment Decision (Spanish)**

Notificación por Escrito de Decisión Acerca de Inscripción

Fecha: _____

Persona llenando este formulario: _____

Título: _____

Plantel: _____

De conformidad con el Artículo 722(g)(3)(E) de la “McKinney-Vento Homeless Education Assistance Law” del 2001 (Ley de Asistencia Educativa a los Desamparados) , se suministra la siguiente notificación por escrito a:

Padre/Madre o Tutor: _____

Estudiante(s): _____

Después de considerar su solicitud de inscripción de el/los estudiantes mencionados precedentemente, su solicitud de inscripción ha sido **DENEGADA** **SOSTENIDA**. Esta decisión está basada en:

Usted tiene el derecho de apelar esta decisión. Por favor complete la forma de Resolución de Disputas y contacte:

Camino Nuevo Charter Academy, Home Support Office
Attn: Homeless Program Local Liaison
3435 W. Temple Street
Los Angeles, California 90026

- El estudiante tiene derecho a inscribirse inmediatamente en la escuela de su elección en espera de la resolución de la disputa.
- Usted puede suministrar información oral o por escrito para respaldar su posición.



ATTACHMENT F: Parent Dispute Resolution Form (English) – Page 1

Parent Dispute Resolution Form

Name of Student DOB
 Site
 Parent/ Guardian Name
 Street Address/Apt. #
 City State Zip Code
 Home Phone Message/Work Phone
 Relation to student E-mail

I have been provided with the following documents, copies of which are attached to this form:

- The Written Notification of Enrollment Decision Form Copy of the District’s Dispute Resolution Process for students experiencing homelessness.
- Contact information for the Homeless Education Program Liaison

1. You may include a written explanation to support your appeal of the school’s decision in the space below. Please attach additional paper as necessary.

Please supply copies of any written documents that may be relevant to/supportive of your complaint. I have attached supporting documents: Yes No

2. Please state the specific relief you are seeking:

I certify that the foregoing is true and correct:

 Signature Date



ATTACHMENT F: Parent Dispute Resolution Form (English) – Page 2

Parent Dispute Resolution Form

Attach additional sheets for details if needed. Mail form to:

Camino Nuevo Charter Academy – Home Support Office
Attn: Homeless Program Local Liaison
3435 W. Temple Street
Los Angeles, California 90026



ATTACHMENT F: Parent Dispute Resolution Form (Spanish) – Page 1

Formulario de Resolución de Disputas para Padres

Estudiante Fecha de Nacimiento

Plantel

Nombre del Padre/Encargado

Dirección/número de apartamento

Ciudad Estado Código Postal

Teléfono Teléfono para Mensajes

Relación con el estudiante Correo Electrónico

Yo he recibido los siguientes documentos, cuyas copias se adjuntan a este formulario:

- La Forma de *Notificación por Escrito de Decisión Acerca de Inscripción*
- Copia del Proceso de Resolución de Disputas para estudiantes desamparados
- Información de contacto del Programa de Educación de Desamparados

1. En el espacio a continuación puede también incluir una explicación por escrito que apoye su apelación de la decisión de la escuela. Incluye otra hoja si fuera necesario.

Por favor incluya copias de cualquier documento escrito que pueda ser relevante/apoye su queja. Yo he incluido documentos de apoyo: Si No

2. Por favor incluya específicamente la resolución que busca:

Yo certifico que lo aquí escrito es verdadero y correcto:

Firma _____
Fecha



ATTACHMENT F: Parent Dispute Resolution Form **(Spanish)** – Page 2

Formulario de Resolución de Disputas para Padres

Adjunto incluya hojas adicionales, si fuera necesario.

Envíe por correo la información a:

Camino Nuevo Charter Academy – Home Support Office

Attn: Homeless Program Local Liaison

3435 W. Temple Street

Los Angeles, California 90026