Homeless Dispute Resolution Procedure

Coahoma AHS District

Coahoma Agricultural High School

District Homeless Contact – Rone Walker 662-621-4193

State Board Policy

DESCRIPTOR TERM: McKinney-Vento Homeless Education Dispute Resolution Procedure  
CODE: 4200  
ADOPTION DATE: December 18, 1992  
REVISION: January, 2012

The *McKinney-Vento Homeless Assistance Act*acknowledges that disputes may arise between the school district and homeless students and their parent(s)/guardian(s) when the student is placed in a school other than the one requested. Guidance for school selection is provided in the law. The law includes dispute resolution among the required duties of the LEA Liaison.

The following procedures are specified in the Act:   
  
1.  Enrollment: Immediately enroll the homeless student in the school preferred by the parents until the dispute is settled.   
  
2.  Written explanation: Provide a written explanation of the school placement decision to the parent/guardian or unaccompanied youth.   
  
3.  Liaison: The designated LEA liaison is assigned to carry out the dispute resolution in an expeditious manner.   
  
4.  It is the responsibility of the school district to inform the parent(s)/guardian(s) of homeless students of the Complaint Resolution Procedures. 

The Mississippi Department of Education, Office of Federal Programs, has adopted a complaint resolution process. In a case where a dispute occurs regarding the education of a homeless child or youth, the following process may be used:

**Local Level**: Every effort must be made to resolve the complaint or dispute at the local level before it is brought to the Mississippi Department of Education (MDE).

1.  If a question concerning the education of the homeless child arises, the first person to contact in the school district is the homeless liaison. Each school district is required to have a designated homeless liaison, with someone in every school or in the central office for the school district able to identify said homeless liaison. If there is a complaint about services for the homeless student(s), the complainant is to be provided a copy of the local complaint procedure. If the district or public school does not have a complaint procedure in place, the following steps are suggested:  
  
a.  The homeless liaison should discuss the complaint with the complainant and the complainant is to be provided copies of the policies that the local Board of Education has adopted concerning the education of homeless children and youth   
  
b.  A determination is to be made as to whether the requested services for the homeless student are consistent with local school board policy   
  
c.  If the complaint is not resolved, the complainant will be advised to present it in writing to the homeless liaison   
  
d.  A written proposed resolution of the complaint or plan of action is to be provided to the complainant within five (5) days of the date of receipt of the written complaint.   
  
2.  If the complaint is not resolved at this level within five (5) days, it may be taken to the superintendent of the district the student is attending or wishes to attend. In addition to presenting the written complaint, an appointment will be made for the complainant to meet with the superintendent to discuss the complaint. At the end of the discussion with the superintendent, a written resolution will be provided within five (5) days of the date of the discussion.   
  
3. If the complaint is still not resolved, it may be possible to appeal to the local Board of Education.   
  
**State Level:**  If the complaint is not resolved in a satisfactory manner at the local level, the complaint may be directed to MDE. Complaints made under this process must be made in writing and signed by the complainant. The following steps are to be taken:   
  
1.  Address the complaint to the Mississippi Department of Education, Office of Federal Programs, State Homeless Education Coordinator, 359 North West Street-Ste. 111, P.O. Box 771, Jackson, MS 39205.   
  
2. Include in the complaint:   
  
a. A description of the situation that prompted the complaint  
  
b. The name(s) and age(s) of the child or children involved  
  
c. The name(s) of the involved school district personnel and the school district or districts involved  
  
d. A description of the attempts that were made to solve the issue at the local level including copies of any documentation used up to that point.  
  
3. The State Homeless Coordinator will gather needed information from statements of the parties involved and will forward the information to the director of the Office of Federal Programs along with a recommendation for resolution or for further investigation.   
  
4. Within thirty (30) days after receiving a complaint, the Director of the Office of Federal Programs will recommend a resolution and will inform interested parties in writing of the decision.   
    
5. If a complainant or one of the parties involved in the complaint disagrees with the decision, that party may, within ten (10) working days, appeal to the Deputy Superintendent of the Office of Instructional Enhancement and Internal Operations. This appeal must be in writing and state why the party disagrees with the decision of the Director of the Office of Federal Programs.   
  
6. Within thirty (30) days after receiving an appeal, the Deputy Superintendent will render a final administrative decision and notify the complainant and the school district(s) involved in writing.   
  
If the party disagrees with the decision of the Deputy Superintendent in a matter concerning homeless children or youth, the party may request a review of the decision by the United States Secretary of Education in accordance with 34 CFR Part 299.11. 

**While the dispute is being resolved, the child or children in question must be enrolled in school. If the dispute is concerning the school of “best interest,” the child must be enrolled in the school preferred by the parent/guardian or unaccompanied youth unless previous arrangements have been implemented.**

<http://www.mde.k12.ms.us/federal-programs/federal-programs---title-x-homeless>

Source:  NCLB, 2001§722 (g)(3)(E)(i)(ii)(iii)(iv)*(Revised 1/2012)*

**Coahoma AHS District**

**Coahoma Agricultural High School**

**Student Residency Questionnaire**

This questionnaire is intended to address the McKinney-Vento Act. Your answers will help the school administration determine residency documents necessary for enrollment of this student. The McKinney-Vento Act addresses assistance for students considered homeless. Homeless children and youth are individuals who lack a fixed, regular, and adequate nighttime residence this includes: children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks or camping grounds due to lack of alternative adequate accommodations; living in emergency or transitional shelters; abandoned in hospitals; or awaiting foster care placement. This also includes children and youth who have primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings. Children and youth who are living in cars, parks, public places, abandoned buildings, substandard housing, bus or train stations, or similar settings; and migratory children who qualify as homeless because they are living in circumstances described above.

1. Presently, where is the student living? Check one box

|  |  |
| --- | --- |
| Section A | Section B |
| * In a shelter * With more than one family in a house or apartment * In a motel, car or campsite * With friends or family members (other than parent/guardian) | * Choices in Section A do not apply |
| **Continue if you checked a box in Section A.**  **STOP** **if you checked a box in Section B, you will not need to complete the remainder of this form. Please return the form to school personnel.** | |

1. The student lives with:

* 1 parent
* 2 parents
* 1 parent and another adult
* A relative, friend, or other adults
* Alone with no adults
* An adult that is not the parent or the legal guardian

School Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ Male \_\_\_\_\_\_ Female

Student Date of Birth: \_\_\_\_\_\_\_\_ (month) \_\_\_\_\_\_\_(day)\_\_\_\_\_\_\_(year)

Name of Parent or Legal Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Legal Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE RETURN THIS FORM TO THE COUNSELOR’S OFFICE OR THE PRINCIPAL.**

**Coahoma AHS District**

**Coahoma Agricultural High School**

**School Homeless Dispute Resolution Process**

School Name: Coahoma Agricultural High School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address: 3240 Friars Point Road; Clarksdale, MS 38614\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Phone: 662-624-4160\_\_\_School Fax: 662-621-4672\_\_\_\_\_ School Counselor Phone: 662-621-4141\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student State ID#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Grade:\_\_\_\_\_\_\_\_

Student Current Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Current Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian/Complaining Party’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to the student:

* Parent
* Guardian
* Unaccompanied Youth
* Other (explain):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lives in a Shelter:

* Yes
* No

Name of the school that parent chooses child to be immediately enrolled in and/or transported to/from until dispute is resolved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is this the school of origin?

* Yes
* No

If no, where was the student transferred from (city and state):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for the complaint:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of the parent/guardian/complaining party:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Principal’s Actions to the Complaint**

Taken within \_\_\_\_\_school days after receiving notice of the complaint.

Date Homeless Liaison was notified of the dispute:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Was a copy of the dispute given:\_\_\_\_\_\_

Action Taken (by Principal):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was the dispute resolved: \_\_\_\_\_Yes \_\_\_\_\_No

**Coahoma AHS District**

**Coahoma Agricultural High School**

**District Homeless Dispute Resolution Process**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student State ID#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student Grade:\_\_\_\_\_\_\_\_

School Name: Coahoma Agricultural High School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Action on Complaint

Taken within \_\_\_\_\_school days after receiving the notice of the complaint.

Did the Education Liaison resolve this dispute?

* Yes
* No

If dispute was resolved: describe the actions taken by the Education 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:

Date of Meeting:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Outcome:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action taken by Coahoma AHS District to resolve the dispute:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was the dispute resolved: Date dispute was resolved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Yes
* No

Explaination:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Further Action Taken (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Personnel Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_