*[Enter District Name]*

**Written Notification of Eligibility and/or School Placement Decision**

In compliance with the McKinney-Vento Act, the following written notification is provided to:

Name of Parent(s)/Guardian(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After reviewing the current living situation of the student(s) listed above, it has been determined that:

**The student(s)s qualify for McKinney-Vento services and it is in the best interest of the student(s) to remain in the School of Origin.** **School or origin:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* *The District Liaison will meet with you to determine the level of need required, if any, and how help can be coordinated for the following areas or support: Basic individual/family needs, educational/academic needs, and/or social/emotional needs.*
* *If your living situation changes, it is the responsibility of the parent/guardian/student to inform the school of changes to your living situation. If a more permanent living situation occurs, McKinney-Vento services may still be provided for the remainder of the academic year.*

**The student(s) qualify for McKinney-Vento services, but it may not be in the best interest of the student(s) to remain in their school of origin and will be supported in enrolling in their new local attendance area school.**

Local attendance area school:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This decision was based on:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* *The District Liaison will work with you to ensure this process/transition is as smooth as possible.*
* *The District Liaison will meet with you to determine the level of need required, if any, and how help can be coordinated for the following areas or support: Basic individual/family needs, educational/academic needs, and/or social/emotional needs.*
* *If your living situation changes, it is the responsibility of the parent/guardian/student to inform the school of changes to your living situation. If a more permanent living situation occurs, McKinney-Vento services may still be provided for the remainder of the academic year.*

**The student(s) does NOT qualify for McKinney-Vento services, but may be supported by other district services**.

This determination was based upon:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* *If your living situation changes, you may re-apply.*
* *You have the right to appeal this decision by completing the attached dispute or by contacting the District Liaison. Additional written or verbal communication to support your position regarding your request may be required to determine McKinney-Vento status and/or the student’s enrollment or continued enrollment in the requested school.*
* *The student(s) listed above has/have the right to enroll or continue enrollment in the requested school pending the resolution of the dispute.*

**District Liaison Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Liaison Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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