

# MORRISVILLE BOROUGH SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: FEBRUARY 22, 2017

REVISED:

## 251-AR-3. ENROLLMENT COMPLAINT TO PENNSYLVANIA DEPARTMENT OF EDUCATION'S STATE COORDINATOR FOR HOMELESS CHILDREN'S INITIATIVE

State Coordinator, Education for Homeless Children & Youth Program  
Pennsylvania Homeless Children's Initiative, Pennsylvania Department of Education  
333 Market Street, 5<sup>th</sup> Floor, Harrisburg PA 17126-0333  
Telephone (717) 783-6468

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

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

Email: \_\_\_\_\_

Dear State Coordinator:

\_\_\_\_\_ is experiencing homelessness. This child is my \_\_\_\_\_  
(Name of Child) (son, daughter, etc.)

I am writing because the \_\_\_\_\_ School District:

☐ will not enroll this child.

\_\_\_\_\_  
\_\_\_\_\_

☐ will not let this child stay in the same school s/he has been attending.

\_\_\_\_\_  
\_\_\_\_\_

☐ will not provide transportation to stay in the same school s/he has been attending.

\_\_\_\_\_  
\_\_\_\_\_

☐ will not provide equal access to public preschool.

\_\_\_\_\_  
\_\_\_\_\_

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- ☐ will not provide equal access to academic or nonacademic services.  
(Explain which services).

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- ☐ Other.

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Please feel free to attach additional pages with explanation of situation, supporting documents, etc. You may call or write to me at the address listed at the top of the page with any questions you may have. Thank you.