

# Students in Transition (SIT) Dispute Resolution Request

(To be completed when a parent disagrees with McKinney Vento Status at local school)

## 1. (School Level)

Date of Request \_\_\_\_\_ School \_\_\_\_\_

Name of Student \_\_\_\_\_

Student Address \_\_\_\_\_

Phone \_\_\_\_\_

Statement of Concern from  
parent: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Statement of Concern from  
Adminstrator: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature: \_\_\_\_\_

Administration Signature \_\_\_\_\_

## 2. (District Level) Request sent to McKinney Vento Liaison

Resolution  
Outcome: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Liaison Signature \_\_\_\_\_ Date \_\_\_\_\_

# Sumner County Schools Transportation Contract for Students in Transition and LEA

This agreement remains in effect as long as the student:

1. Does not violate district transportation rules, and
2. Rides the bus regularly.
3. Student meets qualifications for McKinney Vento services

If the student is not present at the bus stop AND the student's parent/guardian has not phoned the transportation office [phone number] in advance (before 6 a.m. the day of pick-up) to notify the staff of changes in transportation plans on THREE (3) CONSECUTIVE SCHOOL DAYS, then the district will no longer provide transportation each morning for the student. Once the parent fails to comply with this Transportation Agreement, this contract is terminated, and a bus will no longer pick up the child. It then will be the parent's responsibility to contact the school district transportation office to request reconsideration for district transportation. If the district cannot accommodate the request, the parent will become responsible for the child's transportation to school. This agreement applies to the student's pick-up address and current school as noted below.

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
School District: \_\_\_\_\_ Current School: \_\_\_\_\_  
Parent's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Pick-up address: \_\_\_\_\_  
Drop-off address: \_\_\_\_\_  
Date of when transportation will begin (liaison must call transportation office for this information now):  
\_\_\_\_\_  
Regular transportation: \_\_\_\_\_ Special Needs transportation (as noted in student's IEP): \_\_\_\_\_

As the parent/guardian of the above-named student, I agree to make sure my child is waiting for the bus prior to its arrival each school morning OR I will phone the transportation office [phone number] prior to 6 a.m. if the bus is not needed. I understand that if I fail to follow-through with these requirements, then the bus will no longer come to pick-up my child, and I become responsible for making the necessary transportation arrangements to get my child to school.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Liaison Signature (person who assisted parent with completing this form)  
\_\_\_\_\_ Date \_\_\_\_\_

A copy of this agreement must be given to the parent and emailed [Email Address] or Faxed to the Transportation Office [Fax number] immediately. The original must be kept on file in the Liaison's office.