

State Complaint

State Complaint alleging violation of IDEA 2004 and corresponding State & Federal Regulations

Your Name: _____ Student Name: _____

Date: _____ Phone Number: _____

Address: _____

Student Address (if different from above): _____

School District: _____ School Name: _____

School Address: _____

Grade: _____ Birthdate: _____

Relationship to student or students (circle one below):

Parent Attorney Advocate Other (please specify): _____

A copy of ADE's complaint investigation procedures can be obtained by request (at 501.682.4291) or can be found on our website at <http://arksped.k12.ar.us>.

According to federal regulations, a complaint must:

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| <ol style="list-style-type: none">1) Be in writing;2) Be signed;3) Include a statement that a public agency (usually a school district) has violated a requirement of law;4) Include the facts upon which the allegation is based;5) Must allege a violation that occurred within the past year;6) Must include a proposed resolution to the alleged violation; and7) Must be forwarded to the public agency serving the child at the time the complaint is sent to ADE. |
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The form is optional. Complainants may submit their concerns to ADE (at the address listed on the bottom of this form) by using plain paper, stationary, etc.

Please attach additional pages if necessary.

A. Statement of the violation:

You do not have to know specifically what law was violated, but you must explain what you believe the school has done wrong, e.g. "The teachers are not following my child's IEP."

B. Facts upon which the allegation is based:

Describe what actually happened to lead you to believe the school has violated the law, for example, "My child's IEP says he will be seated in the front of the classroom, but when I visited his class yesterday, he was seated in the back of the classroom."

C. Proposed Resolution:

Signature: _____

Date: _____

If you have any questions, please contact:

Arkansas Department of Education
Special Education Unit
Dispute Resolution Section
1401 W. Capitol Avenue, Suite 450
Little Rock, AR 72201
Phone: 501-682-4291
Fax: 501-683-4496
Website: <http://arksped.k12.ar.us>.