Resolution letter template

Date

[Superintendent's Name] [Name of School System] [Address Line] [City, State Zip code]

Dear [Superintendent]:

This is the decision regarding the complaint filed against the [Name of School System] by [complainant] regarding their [son/daughter] name of student. The concerns in the complaint are as follows:

- 1. [first concern] (34 CFR § 300.xxx)
 - a. [detail or quote from complaint]
- 2. [second concern] (34 CFR § 300.xxx)
 - a. [detail or quote from complaint]

The formal complaint process under the Individuals with Disabilities Education Act (IDEA) addresses specific allegations of violations of the IDEA and its regulations or of state special education rules. In response, the [State Department of Education] has reviewed all material submitted by the complainant, reviewed the [Name of School System]'s response, and conducted telephone interviews with the complainant and with system representatives.

The facts are as follows:

- 1. <first fact typically describes the child and the setting>
- 2. <include facts that are relevant to the issues>
- 3. <etc>

The findings are as follows:

- 1. <findings typically correspond to the numbered allegations and include a statement that the system is or is not in compliance with regard to this allegation>
- 2. <each finding must be based on specific facts above>
- 3. <findings that do not correspond to the initial allegations may immerge>

The resolutions are as follows:

[Superintendent's name]
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[month day, year]

<Corrective action(s) will be required for any findings of non-compliance. These are based on the nature of the violation and especially on how the child's educational progress may have been diminished due to any violations.>

<If there are no violations, this section is replaced with a paragraph that closes the complaint.>

All decisions arising from the complaint process are final. There is no appeal or reconsideration process. Failure of the <school system> to complete the required actions may result in the withholding of federal and/or state funds for special education.

All required documentation is due no later than <date> and should be sent to:

[State Director of Special Education], Director [Mailing address]

If you should have any questions, please contact [State Director of Special Education at email address or telephone number].

Sincerely,

[State Director of Special Education], Director Division for Special Education Services cc: <Special Education Director>

<Complainant>

<Investigator>

<District Liaison>