



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 Special Education
 Old Capitol Building
 PO BOX 47200
 Olympia, WA 98504-7200
 (360) 725-6075 TTY (360) 664-3631 FAX (360) 586-0247
www.k12.wa.us/specialed/

Request for Special Education Citizen Complaint
 (This form is not the form to use to file for Due Process)

This form is optional and is designed for you to provide this office with information needed in order to accurately process your complaint. Information about procedural safeguards and dispute resolution options are available on the web site at www.k12.wa.us/SpecialEd/DisputeResolution/default.aspx.

To: Douglas H. Gill, Director
 OSPI, Special Education
 PO BO 47200
 Olympia, WA 98504-7200

Date Sent: _____

**Signed fax copies will be accepted.
 Please fax to (360) 586-0247.**

And to: _____
 Name of agency subject to this complaint

Date Sent: _____

*** You must also send a copy of this complaint to the school district superintendent or public agency's chief officer.**

Section I: Student Information

 Name of Student(s)

 Eligibility Category (Optional)

 Grade

 Name of Student(s)

 Eligibility Category (Optional)

 Grade

 School District of Residence

 School Name

Section II: Complainant Information

Parent/Guardian:

Complainant, if not the parent:

 Name of Parent

 Name of Complainant

 Street Address

 Street Address

 City/State/Zip

 City/State/Zip

 Home phone

 Home phone

 Work phone

 Work phone

 Email

 Email

Please Note: The OSPI Special Education Operations Division is ONLY authorized to investigate allegations regarding special education. Allegations relating to disability discrimination should be forwarded to the Office of Civil Rights at 1-800-421-3481. Allegations of professional misconduct should be initially addressed with the school district Superintendent, or the local Educational Service District. Questions about professional conduct should be directed to Office of Professional Practices at (360) 725-6130.

X

Signature of Person(s) Filing Complaint

Date

Section III: Allegation Information

A. Statement of the violation(s):

You do not need 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.")

I believe the District violated Part B of the IDEA by:

(Attach additional pages if you do not have enough room on the form)

B. Facts upon which the allegation is based:

Please include, to the best of your ability, the significant dates of the events that occurred.

(Attach additional pages if you do not have enough room on the form)

C. What documents do you believe should be reviewed regarding this allegation?

Letters from the school, the student's evaluation and IEP, notices, etc., that you believe will assist in clarifying or verifying the violation.

(Attach additional pages if you do not have enough room on the form)

D. What would you like to see changed?

(Attach additional pages if you do not have enough room on the form)