REQUEST FOR SPECIAL EDUCATION FORMAL COMPLAINT INVESTIGATION

You are not required to use this form to request a complaint investigation; however, all complaint investigation requests <u>must</u> be signed and <u>must</u> include all of the information required by law. A checklist is provided on the second page of this form for you to use before mailing/faxing the completed form. If your request is student-specific, you must provide the student's name and school district. If your request alleges systemic violations of special education law, skip the "Student Information" section and complete the rest of the form.

1. Student Information		
Name:	Date of Birth:/	
Address:		
City:		
Phone number:	Alternate phone number:	
Name of school student attends/attended:		
Male Female Grade: Race: _	Exceptionality:	
Is student currently receiving special education services? Yes No		
2. Requestor Information		
Requestor Name:	Relationship to student:	
Address:		
City:		
Phone number:		
Fax number: Email address:		
Does requestor need accommodations in order to participate in this process? Yes No		
3. Complaint Information		
Your complaint must allege a violation of the Individuals with Disabilities Education Act (IDEA), La. R.S. 17:1941, et seq., and/or its implementing regulations. The violation must have occurred within one year before the Department received the complaint investigation request. Describe the problem/nature of dispute. What are the relevant facts, significant people, dates, and/or events? Do you have a proposal/resolution for the stated dispute/problems(s)? Are there any documents the investigator should review that support the allegation(s)? (If so use Exhibit List)		
Attach pages with additional information or allegations as needed. (Additional pages) *Are you interested in mediation? Did you submit a mediation request?		

4. Notification for Complaint Investigation		
By federal and state regulation, you must send a copy of the request for complaint investigation to the school district. Indicate below when and to whom you sent the copy of the complaint letter.		
Date Sent:/		
Special Education Director or Superintendent	Mailing Address	
Tracking # (if applicable)	Email address:	
5. Signature(s)		
By federal and state regulation, you <u>must</u> sign the re	equest for complaint investigation.	
Requestor's Signature:		
Before submitting your request for a formal c completed the items listed below.	Request Checklist complaint investigation, please make sure you have	
You provided the student's name, contact school district the student attends when requon behalf of an individual student. (Section 1)		
	nd contact information where you can be when, where, and how the alleged violation	
took place. (Section 3) You provided a proposed solution to the pro	blam (Saction 2 a)	
You signed your complaint. (Section 5)	blem. (Section S.e.)	
You sent a signed copy of your complaint to the school district. (Section 4)		
Only alleged violations that occurred within ONE YEAR of the date the Department receives the		
complaint investigation request will be considered	ed. (Section 3.c.)	
Mail, fax, or email	l your complaint to:	
Louisiana Departn		
Attn: Lega		
1201 North		
Baton Rouge		
Fax: (225) Email: <u>DisputeReso</u>		
You <u>must</u> also send a <u>signed</u> copy of your Requ	k-j y-au'	
special education director or superintendent of violation.		
Accessibility needs of the parent or student with	a disability to participate in the investigation.	
Translation Needs (Please specify):		
Interpreter Needs (Please specify):		
Accessibility Needs (Please specify):		