KANSAS STATE DEPARTMENT OF EDUCATION
Special Education Services

Formal Complaint Request Form

Any parent of a child with an exceptionality, another individual, or agency or organization that believes a school district is not following state or federal laws or regulations related to the Individuals with Disabilities Education Act may file a formal complaint with the state department of education.

- A copy of the complaint must also be sent to the school district.
- The complaint must allege a violation of special education laws and regulations that occurred not more than one year before the date the complaint is filed.
- The complaint must be in writing, signed, and sent to Special Education Services.
- Any document submitted by either the school district or parents will be available to the other party, upon request.

Your request for a formal complaint investigation must include the following information:

1. **The name, address, and telephone number of the person filing the formal complaint.**

Name _____

Address _____

City/State/Zip _____

Telephone _____

2. **The name of the school the child is attending. Additional information regarding the USD number, address, and telephone number of the school where the child is attending is optional, but would be helpful in identifying responsible parties.**

Name of School _____ USD No. _____

School Address _____
(not required)

City/State/Zip _____
(not required)

Telephone _____
(not required)

3. **If the alleged violations concern a specific child, the name and home address of the involved child**

Name of Child _____ Disability _____
(not required)

Address _____
contact information if the child is homeless

City/State/Zip _____

4. **State each of your concerns. You must include the facts that provide the basis of each concern. Such facts must include when the concern arose and who, or what circumstances, caused the concern. Also state, to the extent known, what you believe the school district should do to resolve each of your concerns. (Attach additional pages if needed.)**

What is Concern #1:

_____

_____

What are the facts:

_____

_____

_____

_____

What do you believe should be done to resolve this concern?

_____

_____

_____

If you have additional concerns, please state: (a) each concern; (b) the facts that support each concern and (c) what you believe should be done to resolve the concern.

_____

Signature Date

NOTE: Federal regulations provide that the school district has the discretion of offering a proposal to resolve the concerns presented in a complaint or offering to participate in voluntary mediation with the complainant. If the parties agree to (a) mediate any of the concerns presented and (b) to extend the 60 day time line for completion of a complaint investigation, a mediator will be provided by the Kansas State Department of Education, at no expense to the parties.

Upon receipt of a written, signed complaint, the Formal Complaint Investigator will conduct an investigation and provide a written report of findings to the person or agency making the complaint and to the school district. If a violation is confirmed, the report will contain corrective actions and timelines to be followed by the school. The formal complaint report is final, unless one of the parties appeals the report. Either party may appeal the report by filing a written notice of appeal with the Kansas Commissioner of Education.

The formal complaint must be signed and mailed or personally delivered to:

Formal Complaint Investigator
Special Education Services
Kansas State Department of Education
120 SE Tenth Avenue
Topeka, KS 66612-1182