



UNION SCHOOL DISTRICT

"Home of the Golden Knights and Damsels"

354 Baker Street
Suite 2

Mrs. Jean McCleary - Superintendent
Rimersburg, PA 16248-9211

Phone: 814-473-6311 x 5
Fax: 814-473-8201

Title Complaint Form District and Non-Public Schools

Please feel free to make copies of this form, use additional paper, or call Union School District at 814-473-6311 x0 or the PA Federal Programs Regional Coordinator at 717-787-7135 for additional information.

My preferred method of contact by the individual assigned to this complaint would be:

By phone (Number) _____

Best time during normal business hours to call _____.

In person at a public facility during normal business hours. The location would probably be a school or Intermediate Unit building to permit duplication of documents.

Are you filing this complaint on behalf of a specific child? Yes _____ No _____

Please provide your contact information, relationship to child, and signature.

Name: _____

Address: _____

Phone Number: _____

Home

Cell

Work

Relationship to child or children:

Parent Attorney Advocate Other

Signature

Date

***NOTE: THIS MUST BE SIGNED FOR THE SCHOOL DISTRICT TO INVESTIGATE.**

The name and address of the residence of the child, school, and school district.

Child's Name: _____ Date of Birth: _____

Address: _____

Is the child currently in school? Yes _____ No _____

If so, where is the child's current program?

School District: _____ School: _____

Complete only if the complaint is filed on behalf of a homeless child or youth.

Contact Person _____ Telephone Number _____

Please provide a statement about the violation or issue, which you believe has occurred. Please include a description about the nature of the problem. Please list the facts that support your statement.

To the best of your knowledge, please suggest a solution to this problem.

You must send a copy of this complaint to the LEA. By signing below, you indicate to Union School District that you have provided a copy of the complaint to the LEA.

Signature

Date

Please return form to: Union School District, 354 Baker Street, Suite 2, Rimersburg, PA 16248

Official Use:

Date/Time Received: _____

Method of Receipt: _____

District Official Accepting Complaint: _____