

LAS VIRGENES UNIFIED SCHOOL DISTRICT

Uniform Complaint Procedure

UCP Reporting Form

The Uniform Complaint Procedures must be used when addressing complaints regarding: (A) the alleged unlawful discrimination on the basis of age, sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, or mental or physical disability in any program or activity conducted by a local agency, which is funded directly by or that receives or benefits from any state financial assistance; (B) adult education, consolidated categorical aide, migrant education, career technical/technical education/technical training, child care and development, child nutrition, and special education; and, (C) the alleged unauthorized charging of pupil fees for educational activities.

I. Contact Information:

Name: _____
Address: _____
City: _____ Zip: _____
Home Phone: _____ Work or Cell Phone : _____

II. Complainant:

You are filing this complaint on behalf of: _____
 Yourself your child or a (student) another student a group

III. School Information:

School Name: _____
Principal's Name: _____
Address: _____ City: _____

IV. Basis of Complaint:

Please check the appropriate box(s) to identify the basis of your complaint.

- Adult Education
- Consolidated Categorical Aid
- Migrant Education
- Career Technical/Technical Education/Technical Training
- Child Care and Development
- Child Nutrition
- Special Education
- Unauthorized charging of student fees
- Sexual Harassment
- Discrimination on the basis of:
 - Sexual orientation Ancestry Religion
 - Gender Mental or Physical Color
 - Ethnicity disability Association with any
 - Race Age of these categories
 - National origin Sex (Title IX)

V. Details of Complaint:

Please answer the following questions to the best of your ability. Attach additional sheets of paper if you need more space.

Please **describe** the type of incident(s) you experienced that led to this complaint, including the events or actions, in as much detail as possible:

List the **individuals** involved in the incident(s) complaint of:

List any **witnesses** to the incident(s):

Describe the **location** where the incident(s) occurred:

Please list all **dates and times** when the incident(s) occurred or when the alleged acts first came to your attention:

What steps, if any, have you taken to resolve this issue before filing a complaint?

Signature of person filing complaint

Date

Received by: _____

Title: _____

Please provide a duplicate copy to the complainant.