

Formal State Complaint Form

This form is designed to provide the NCDPI OEC required information to accurately process your complaint. Use of this form is optional.

(Complaints must address an alleged violation that occurred not more than one year prior to the date the complaint is received by the Office of Exceptional Children).

SECTION ONE: Complainant (the person filing the complaint), Student, and Public Agency (public school system, charter school, or state operated program) Information (Required)

Complainant Information (Required)

Name		Relationship to Student	
Address			
Email		Phone Number	
Check box if you agree to receive correspondence related to this complaint from NCDPI via confidential email <i>(optional)</i> .			<input type="checkbox"/>
If you are a third-party complainant, check the box if a signed consent form from the parent and/or student is attached. A signed consent form is needed to exchange information, including the final report, with the third-party complainant.			<input type="checkbox"/>

Student Information (Required)

Name		Date of Birth	
Disability		Grade	
Address: <i>(if different from Complainant) In case of homeless youth, provide contact information.</i>			

Public Agency: The alleged violation(s) are against (Required)

Name of Public Agency	
Name of School <i>(Location of alleged violation)</i>	
Name of School the student is attending, <i>if different from above</i>	
Check box if the student is not currently enrolled in the named Public Agency <i>(optional)</i>	
<input type="checkbox"/>	

SECTION TWO: Statement of Alleged Violation(s) and Supporting Facts (Required)

You do not need to know the specific statute or policy that may have been violated; however, you must **explain** what you believe the school has done, or failed to do, that is in violation of IDEA and NC *Policies*. For example, "The teachers are not following my child's IEP." If there is more than one alleged violation, use the additional page(s) to indicate the other alleged violation(s) and supporting facts.

Alleged Violation #1 (Required)	
Date or Time Period of Alleged Violation	
Supporting Facts (Required) (see page 2)	

Supporting Facts: Provide details about the alleged violation. (Required)

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Check the box if there are additional alleged violations attached (<i>optional</i>).	<input type="checkbox"/>
Check the box if additional documentation is attached (<i>optional</i>).	<input type="checkbox"/>

SECTION THREE: Proposed Solution (Required) (if known)

What is your proposed solution to the alleged violations?

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SECTION FOUR: Signature, Date, and Confirmation (Required)

Please sign, date, and confirm that a copy of the state complaint has been provided to the Superintendent or School Administrator of the Public Agency in which the allegations occurred in the boxes below.

Ensure you have included all required information (*) before submitting this form to NCDPI and the Public Agency.

The NCDPI OEC accepts electronic signatures in accordance with the federal E-SIGN Act (15 U.S.C. § 7001 et seq.) and the Uniform Electronic Transactions Act (UETA). An electronic signature may include a typed name, scanned handwritten signature, or a verified digital signature submitted through a secure platform. Submission by email from a known address also constitutes confirmation of authorship and intent to file. All parties must retain copies of signed documents and may request a paper version at any time.

Complainant's Signature (Required)		Date (Required)	
I confirm that a copy of the state complaint was provided to the Superintendent or School Administrator for the Public Agency in which the alleged violations occurred. Initial the box to the right. (Required)			

SECTION FIVE: Submission of Complaint (Required)

Send the finalized complaint form to the NCDPI OEC Section Chief: IDEA Dispute Resolution by postal mail or email:

Mailing Address:	Section Chief: IDEA Dispute Resolution NCDPI Office of Exceptional Children 6356 Mail Service Center Raleigh, NC 27699-6536
Email Address:	state_ec_complaints@dpi.nc.gov

FOR NC DPI USE ONLY

Complaint Number	DRC Assigned	Date Received	Final Report Due

Statement of additional alleged violations and supporting facts, if any:

Alleged Violation #2	
Date or Time Period of Alleged Violation <i>Not more than 1 year prior to date complaint is filed.</i>	

Supporting Facts: *Provide details about the alleged violation.*

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Alleged Violation #3	
Date or Time Period of Alleged Violation	
Supporting Facts: <i>Provide details about the alleged violation.</i>	