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### Massachusetts Department of

### Elementary and Secondary Education

75 Pleasant Street, Malden, Massachusetts 02148-4906 Telephone: (781) 338-3700

 TTY: N.E.T. Relay 1-800-439-2370

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| OFFICE OF CHARTER SCHOOLS AND SCHOOL REDESIGNCHARTER SCHOOL COMPLAINT FORM |

In order to address your current concerns as promptly as possible, the Department of Elementary and Secondary Education requests that you provide the following information.

Name of School:

School Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Phone#: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City or Town: State: Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone #: ( ) \_\_\_\_\_\_\_\_\_ Work # ( ) \_\_\_\_\_\_\_ Cell # ( ) \_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Role: 1=Parent; 2=Advocate; 3=ESE Assigned Education Surrogate-Parent; 4=Student;

 5=School Employee; 6=Other (Specify)

Accommodations you will need in communicating with the Department:

If you complaint involves a particular student, please identify:

Student or Group Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade/Level: Age: \_\_\_ Male/Female/Transgender: \_\_\_\_\_\_\_

Your language if not English:

The local school person to whom a copy of this complaint has been forwarded:

The last local school person(s) you have contacted in an effort to resolve this problem:

Address Telephone #:( )

**Please describe your concern on the attached page, stating the specific facts on which the concern is based. Please attach any documents that you believe would be helpful to the Department of Elementary and Secondary Education in understanding your concern.**

**Please be certain to include a description of your attempts to resolve your current concern(s) prior to contacting the Department, and describe specific actions you believe would resolve your concern(s).**

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|  [Received in ESE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] |

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|  **BRIEF STATEMENT OF CURRENT CONCERN(S)** |
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|  **YOUR ATTEMPTS TO RESOLVE CURRENT CONCERN(S)** |
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| ACTIONS BY THE SCHOOL YOU BELIEVE WOULD RESOLVE YOUR CONCERN(S)  |
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|  **Have you filed a complaint with any other agencies or units at ESE? [ ] NO [ ] YES** |

**Signature of Parent/Guardian/Student 18 or over: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sign and return this Charter School Complaint Form**

**By mail at 75 Pleasant Street, Malden, MA 02148-4906**

**OR**

**By Fax at 781-338-3220**

**OR**

**By email at** **Charterschools@doe.mass.edu** **by saving the completed form and**

**attaching it to your email.**