UNIFORM COMPLAINT PROCEDURE FORM

Last Name: _________________________________ First Name/MI: _________________________________
Scholar Name (if applicable): ___________________________ Grade: _______ Date of Birth: _______
Street Address/Apt. #: _________________________________________________________________
City: ________________________________ State: ___________ Zip Code: ______________
Home Phone: _______________ Cell Phone: ________________ Work Phone: _______________
School/Office of Alleged Violation: _____________________________________________________

For allegation(s) of noncompliance, please check the program or activity referred to in your complaint, if applicable:

☐ Academic Achievement ☐ Foster/Homeless Youth Education ☐ Migratory Pupils
☐ Bilingual Education ☐ Juvenile Court School Pupils ☐ School Safety Plan
☐ Compensatory Education ☐ Local Control Funding ☐ Special Education
☐ English Proficiency ☐ Formula/ Local Control and Accountability Plan (LCAP)
☐ Every Student Succeeds Act / No Child Left Behind Programs ☐ Migrant Education
☐ Foster/Homeless Youth Education ☐ Juvenile Court School Pupils
☐ Local Control Funding Formula/ Local Control and Accountability Plan (LCAP)
☐ Migrant Education

For allegation(s) of unlawful discrimination, harassment, intimidation or bullying, please check the basis (actual or perceived) of the unlawful discrimination, harassment, intimidation or bullying described in your complaint, if applicable:

☐ Age ☐ Genetic Information ☐ Sex
☐ Ancestry ☐ Immigration Status/Citizenship ☐ Sexual Orientation
☐ Color ☐ Marital Status ☐ Based on association with a person or group with one or more of these actual or perceived characteristics
☐ Disability (Mental or Physical) ☐ Medical Condition
☐ Ethnic Group Identification ☐ Nationality / National Origin
☐ Gender / Gender Expression / Gender Identity ☐ Race or Ethnicity
☐ Religion

Based on association with a person or group with one or more of these actual or perceived characteristics
1. Please give facts about the complaint. Provide details such as the names of those involved, dates, whether witnesses were present, etc., that may be helpful to the complaint investigator.

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2. Have you discussed your complaint or brought your complaint to any Charter School personnel? If you have, to whom did you take the complaint, and what was the result?

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

3. Please provide copies of any written documents that may be relevant or supportive of your complaint.

I have attached supporting documents.  
☐ Yes  ☐ No

Signature: ________________________________
Date: __________________________

Mail complaint and any relevant documents to the Compliance Officer:

J.J. Lewis | Superintendent & CEO
850 Hampshire Road, Suite P
Thousand Oaks, California 91361
(818) 824-6233
jlewis@compasscharters.org