



# FULLERTON SCHOOL DISTRICT

## Uniform Complaint Procedures COMPLAINT FORM

### I. Contact Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work or Cell Phone: \_\_\_\_\_

### II. Complainant

You are filing this complaint on behalf of: \_\_\_\_\_

Parent/Guardian       Pupil       Witness to the Incident       Other

### III. School Information

School Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Principal: \_\_\_\_\_

### IV. Basis of Complaint

District violation of state or federal law or regulations governing:

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Education                   | <input type="checkbox"/> Local Control Accountability Plan              |
| <input type="checkbox"/> After School Education and Safety | <input type="checkbox"/> Migrant Education                              |
| <input type="checkbox"/> Agricultural Vocational Education | <input type="checkbox"/> Peer Assistance & Review Programs for teachers |
| <input type="checkbox"/> American Indian Education         | <input type="checkbox"/> Pupil Fees for Educational Activities          |
| <input type="checkbox"/> Bilingual Education               | <input type="checkbox"/> Regional Occupation Centers                    |
| <input type="checkbox"/> Career/Technical Education        | <input type="checkbox"/> School Safety Programs                         |
| <input type="checkbox"/> Child Care & Development          | <input type="checkbox"/> State Preschool Programs                       |
| <input type="checkbox"/> Child Nutrition                   | <input type="checkbox"/> Special Education                              |
| <input type="checkbox"/> Compensatory Education            | <input type="checkbox"/> Tobacco-Use Prevention Education               |
| <input type="checkbox"/> Consolidated Categorical Aid      |   |
| <input type="checkbox"/> Early Childhood Education         |   |
| <input type="checkbox"/> Economic Impact Aid               |   |
| <input type="checkbox"/> English Learners Programs         |   |

Unlawful discrimination, including discriminatory harassment, intimidation, or bullying, based on actual or perceived characteristics of the following:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Age   | <input type="checkbox"/> Gender Expression             | <input type="checkbox"/> Pregnancy                    |
| <input type="checkbox"/> Ancestry  | <input type="checkbox"/> Gender Identity               | <input type="checkbox"/> Race or Ethnicity            |
| <input type="checkbox"/> Association with any of these actual or perceived characteristics | <input type="checkbox"/> Genetic Information           | <input type="checkbox"/> Religion                     |
| <input type="checkbox"/> Color   | <input type="checkbox"/> Immigration Status            | <input type="checkbox"/> Sex                          |
| <input type="checkbox"/> Ethnic Group Identification                                       | <input type="checkbox"/> Marital or Parental Status    | <input type="checkbox"/> Sexual Harassment (Title IX) |
| <input type="checkbox"/> Gender  | <input type="checkbox"/> National Origin               | <input type="checkbox"/> Sexual Orientation           |
|  | <input type="checkbox"/> Nationality                   |   |
|  | <input type="checkbox"/> Physical or Mental Disability |   |

Allegations of noncompliance of the following:

- Bullying that is not based on the above listed protected classes;

- Retaliation against a complainant or other participant in the complaint process or anyone who has acted to uncover or report a violation subject to the uniform complaint procedures;
- Reasonable accommodation to a lactating student;
- Prohibition against requiring students to pay fees, deposits, or other charges for participation in educational activities;
- Foster youth regarding placement;
- Homeless student as defined in 42 USC 11434a;
- Assignment of a student to a course without educational content for more than one week in any semester or to a course the student has previously satisfactorily completed without meeting specified conditions;
- Physical education instructional minutes;
- Retaliation against a complainant or other participant in the complaint process;
- Any other complaint as specified in a District policy.

**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, in as much detail as possible, including all dates and times when the incident(s) occurred or when the alleged acts first came to your attention and location(s) where the incident(s) occurred:

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

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List any witnesses to the incident(s):

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

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\_\_\_\_\_  
Signature of Person Filing Complaint

\_\_\_\_\_  
Date

Please submit this complaint to:

Fullerton School District  
 1401 W. Valencia Drive  
 Fullerton, CA 92833  
 T: (714) 447-7450  
 F: (714) 447-7538