

Castro Valley Unified School District

UNIFORM COMPLAINT PROCEDURES

Purpose: The Uniform Complaint Procedures (UCP) may be used for complaints alleging non-compliance of state and federal laws and regulations governing educational programs or discrimination. Most parents'/guardians' concerns can be resolved informally with the school principal. If this is not possible, this form may be used to file a formal complaint.

Name: _____

Phone Number: _____ Email: _____

Mailing Address: _____ City/Zip Code: _____

Please check: Parent/Guardian Student District Employee Other _____

Subject of complaint (please check all that apply):

- Any forms of discrimination (if the alleged harasser/discriminator is a School District employee or District)
- Prohibition against requiring students to pay fees, deposits or other charges for participation in educational activities.
- Requirements for development and adoption of a school safety plan.
- Violation of law or regulation governing the following program(s):
 - Adult Education
 - Career/Technical Education
 - Child Development
 - Special Education
 - Child Nutrition
 - Section 504
 - Local Control Accountability Plan

Date of Problem: _____ Course/Grade Level and Teacher Name: _____

Location of Problem (School Name, Address, and Room Number or Location):

Please describe the issue of your complaint in detail. You may attach additional pages if necessary to fully describe the situation.

By signing below, you attest you have read the school district policy of Uniform Complaint Procedures. If you wish to submit a complaint anonymously, please contact the district office via telephone, 510-537-3000.

SIGNED: _____ DATE: _____

This complaint form must be submitted to the district office at the address listed below.

Please file this complaint at the following location:

Office of the Superintendent
4400 Alma Avenue
Castro Valley, CA 94546

For Office Use Only

COMPLAINT RECEIVED BY: _____ DATE & TIME: _____