

Jefferson County Board of Education
Student Data Privacy Accessibility and Transparency Act
Parent Complaint Form

Please Print

Name (Complainant): _____

Mailing Address: _____

Phone Number: (home): _____
(work): _____ (cell): _____

Local Education Authority complaint is being filed against:

Date on which violation occurred: (mm/dd/yyyy): _____

Statement of alleged violation: (attach additional sheets if necessary)

List of names and telephone numbers of individuals who can provide additional information:

Has complaint been filed with any other government agency concerning this matter?

Select YES NO

If yes, provide the name of the agency: _____

Signature of Complainant:

_____ Date: _____

Mail form to: Jefferson County Board of Education, Sam Dasher, 1001 Peachtree Street, Louisville, GA 30434
Or email form to: dashers@jefferson.k12.ga.us

Please attach/enclose copies of all applicable documents supporting your complaint.