Twin Hills School District

APPLE BLOSSOM | K-5
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Twin Hills Union School District
Exhibit (E 1312.3) – Uniform Complaint Procedures (UCP) Complaint Form

Time Stamp: _____ File #: _____

UNIFORM COMPLAINT FILING FORM

The District's Uniform Complaint Procedures (UCP) shall be used to investigate and resolve complaints alleging violations of state or federal law or regulations governing educational programs, including but not limited to:
- Consolidated categorical aid programs
- Child nutrition programs
- Special education programs
- Local Control and Accountability Plan (LCAP) compliance
- Student fees
- Unlawful discrimination, harassment, intimidation, or bullying

Complaints alleging discrimination, harassment, intimidation, or bullying may be based on actual or perceived characteristics including race, color, ancestry, national origin, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity, gender expression, or any other protected category under state or federal law.

Timeline: A complaint must be filed no later than six (6) months from the date of the alleged violation or when the complainant first obtained knowledge of the facts.
Please refer to BP and AR 1312.3 for additional information.

COMPLAINANT INFORMATION

Last Name / Organization: _____

First Name: _____ MI: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Email: _____

SUBJECT OF COMPLAINT (if applicable)

Name: _____

School/Department: _____

Position/Title (if applicable): _____

DETAILS OF COMPLAINT

Date(s) of Incident: _____

Location(s): _____

Describe the nature of the complaint (attach additional pages if needed):

ALLEGED VIOLATION

Identify the specific law, regulation, or policy violated (if known):

REMEDY REQUESTED

Describe the outcome or resolution you are seeking:

SIGNATURE

I certify that the information provided is true and correct to the best of my knowledge.

Signature: _____ Date: _____

FOR DISTRICT USE ONLY

Received by: _____

Signature: _____ Date: _____

Date forwarded to Compliance Officer: _____

Compliance Officer: _____

Date of Final District Decision: _____

Date Complainant Notified of Appeal Rights: _____

NOTICE OF APPEAL RIGHTS

The complainant may appeal the District's decision to the California Department of Education (CDE) within:
- 15 days of the decision, or
- 60 days for complaints involving discrimination

SUBMISSION OPTIONS

Complaints may be submitted in person, by mail, or electronically to:

Twin Hills Union School District Office
700 Watertrough Road
Sebastopol, CA 95472
707-823-0871 (District Office- Re: Compliance Officer's Email)