60-Day Special Education Complaint letter

	Date			
Ms. Crystal Richardson Program Coordinator, Special Education Services Post Office Box 302101 Montgomery, Alabama 36130-2101				
Dear Ms. Richardson:				
I believe the Schollindividuals With Disabilities Education Improved Education Chapter. I am filing a 60-Day Special I	ool System has violated requirements for special education under the <i>ment Act of 2004</i> (IDEA) and/or the <i>Alabama Administrative Code</i> , Special Education Complaint.			
	ht with my consent to mediation to attempt to resolve my concerns about diation and to an extension in the complaint timeline if needed in order for			
1125	Signature Date			
on which the statement(s) is based, and proposed Violation(s):	s not more than one year prior to the date the complaint is received; the facts resolution(s) are written in the boxes below.			
violation(s).				
Facts About the Violation(s):				
Proposed Resolution(s):				

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The alleged violations are about a specific child with disabilities. YES NO If yes, the following information is required.

The name and address of the residence of the child:					
Name:					
Address:					
City/State/Zip					
Telephone Number ()					
Name of school child attends:					
(If the child is homeless, provide any available contact infor	mation.)				
Description of the problem of the child, including facts relati	ing to the problen	1:			
Proposed Resolution(s) to the extent known and available to	the party at the ti	me the comp	laint is filed:		
Sincerely,					
Sincerery,	Signature	Parent	Student	Agency	Other
				Agency	other
	Printed Name o		-		
	Address, Route	Number, or I	'.O. Box Numl	ber	
	City/State/Zip Telephone Num	her			
	reiephone runi				

cc: Local Education Agency Superintendent