

# 60-Day Special Education Complaint letter

Date \_\_\_\_\_

Dr. DaLee Chambers  
Program Director, Special Education Services  
Post Office Box 302101  
Montgomery, Alabama 36130-2101

Dear Dr. Chambers:

I believe the \_\_\_\_\_ School System has violated requirements for special education under the *Individuals With Disabilities Education Improvement Act of 2004* (IDEA) and/or the *Alabama Administrative Code*, Special Education Chapter. I am filing a 60-Day Special Education Complaint.

I understand that the school system has the right with my consent to mediation to attempt to resolve my concerns about special education. I consent to participate in mediation and to an extension in the complaint timeline if needed in order for mediation to be scheduled and convened.

[      YES                      NO

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The violation(s) of special education requirements not more than one year prior to the date the complaint is received; the facts on which the statement(s) is based, and proposed resolution(s) are written in the boxes below.

Violation(s):

Facts About the Violation(s):

Proposed Resolution(s):

## 60-Day Special Education Complaint letter

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 information.)
Description of the problem of the child, including facts relating to the problem:
Proposed Resolution(s) to the extent known and available to the party at the time the complaint is filed:

Sincerely,

	Signature	Parent	Student	Agency	Other
	Printed Name of Person Filing Complaint				
	Address, Route Number, or P.O. Box Number				
	City/State/Zip				
	Telephone Number				

cc: Local Education Agency Superintendent