



# Request for Complaint Investigation

Date received by WDE \_\_\_\_\_

## Directions

A copy of the Request for Complaint Investigation must be sent to the district or public agency responsible for the child. Use of this form is optional. The signed original complaint must be sent to:

### State Director of Special Education

Wyoming Department of Education (WDE) Special Education Programs

122 W. 25th Street, Ste. E200 Cheyenne, Wyoming 82002

P: (307) 777-2961 F: (307) 777-6234

[wde-disputeinbox@wyo.gov](mailto:wde-disputeinbox@wyo.gov)

## General Information

- Parents and other individuals or organizations, including individuals or organizations from another state, may file a complaint alleging a violation of IDEA and corresponding federal regulations and Wyoming Chapter 7 rules by completing and sending the form to WDE.
- The complaint must allege a violation that occurred not more than one year prior to the date the complaint is received by the WDE.
- An asterisk (\*) indicates required information.

### 1. Information About the Child

*NAME OF CHILD	DOB	GRADE

*SCHOOL	*ADDRESS OF THE RESIDENCE OF THE CHILD
*IF CHILD OR YOUTH IS UNHOUSED, PROVIDE AVAILABLE CONTACT INFORMATION.	

NAME(S) OF PARENT OR GUARDIAN		
FULL ADDRESS		
EMAIL		
PHONE	H:	H:
	W:	W:

## 2. District or Agency

NAME OF DISTRICT OR AGENCY & ADMINISTRATOR	PHONE

## 3. Complaint and Supporting Facts

Number and list each allegation separately. Describe the violation and the specific facts that relate to each violation. Provide the date of each violation, if known. You may attach additional pages if necessary.

*ALLEGATIONS AND SUPPORTING FACTS	DATE

*ALLEGATIONS AND SUPPORTING FACTS	DATE

#### 4. Proposed Solution

Describe what you think needs to be done to correct the problem (if you know). You may attach additional pages if necessary.

**\* If alleging violations with respect to a specific child, provide a proposed solution to the problem if known:**

#### 5. Mediation

The WDE will offer a parent who has filed a complaint and the public agency responsible for the child an opportunity to voluntarily engage in mediation in an effort to resolve the complaint.

- Are you interested in mediation to attempt to resolve this complaint? ☐ YES ☐ NO

#### 6. Complainant Signature and Contact Information

*SIGNATURE	DATE
*CONTACT INFORMATION	

**The person filing a Complaint must forward a copy of the complaint to the district or public agency responsible for the child.**