

**Georgia Department of Education
Complaint Form for Federal Programs under the No Child Left Behind
Act of 2001**

Please Print

Name (Complainant):
Mailing Address:
Phone Number (home): Phone Number (work):
Agency/agencies complaint is being filed against:
Date on which violation occurred:
Statement that the Georgia Department of Education, local school system, other agency or consortium of agencies has violated a requirement of a Federal statute or regulation that applies to an applicable program (include citation to the Federal statute or regulation) (attach additional sheets if necessary):
The facts on which the statement is based and the specific requirement allegedly violated (attach additional sheets if necessary):

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

Has a complaint has been filed with any other government agency? If so, provide the name of the agency.

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

Signature of Complainant:

Date:

Mail this form to:

**Georgia Department of Education
Office of Legal Services
205 Jesse Hill Jr. Drive SE
2052 Twin Tower East
Atlanta, GA 30334**