



800 Governors Drive Pierre, SD 57501-2294

Sarah Carter, Director

Signature of Person(s) Filing Complaint

T 605.773.3134 F 605.773.6139 www.doe.sd.gov

To:

Office of Education Services and Supports Part C State Complaint Form

(There is a separate form when filing for a Due Process Hearing)

Birth to Three		
800 Governors Dr.		
Pierre, SD 57501		
Section I: Student Information		
Child's Name:	Eligibility Category (Optional):	
School District of Residence:	Date of Birth:	
	Age:	
Local Birth to Three Provider:		
Address:		
City: State:		ZIP:
Child falls under McKinney-Vento Homeless Assistance Act		
Yes No		
Section II: Complainant Information		
Parent/Guardian:	Complainant, if not the parent:	
Name of Parent:	Name of Complainant	
Street Address:	Street Address:	
City/State/Zip	City/State/Zip	
Home/Work Phone	Home/Work Phone	
E-mail	E-mail	
*Please Note: If you believe the Birth to 3 program has violated a federal Birth to 3 program director. Upon receiving your written complain about procedural safeguards and dispute resolution options are avhttp://doe.sd.gov/Birthto3/documents/DisputeRe.pdf.	nt, an investigation will be complete	

Date

Section III: Allegation Information	
A. Statement of the violation(s)	ras violated, but you must explain hat you believe has gone wrong, e.g.
"The local Birth to Three program or school distr	
The local billin to Three program or school distr	ict are not following my child's it or .
(11)	se additional pages if necessary)
(0.	se additional pages if necessary)
B. Facts upon which the allegation	n is hased:
	prificant facts and dates of the events that occurred.
Thease include, to the best of your ability, the sig	initiality facts and dates of the events that occurred.
(1.1)	se additional pages if necessary)
(0.	se additional pages if flecessary)
C What documents do you believe	e should be reviewed regarding this allegation?
	school, the child's evaluation and IFSP notices, etc, that you
believe will assist in clarifying or verifying the vio	
believe will decide in claimying of verifying the vie	idion.
(11)	se additional pages if necessary)
(0.	se additional pages if necessary)
D. What would you like to see cha	inned?
D. What would you like to see that	mycu:
	se additional pages if necessary)

Please Note*

Conflict is often inevitable, but it need not produce negative results. If the parent and school/local program personnel are unable to resolve a conflict concerning a child with a developmental delay or disability, then mediation is an available option. Mediation is completely voluntary. It is optional for both parties. Mediation in the Part C program is a process to assist parents, local Birth to Three programs and schools in resolving disagreements regarding a child's Birth to Three services. Mediation is at no cost to parents/ guardians or the school district/local program.

A trained mediator works with both parties to guide them toward a mutually satisfactory solution in the best interest of the child. This occurs at a non-adversarial meeting. It will not interfere with any procedural safeguards including a request for a due process hearing. To find more information about mediations please visit: http://doe.sd.gov/Birthto3/documents/DisputeRe.pdf.