VISTA UNIFIED SCHOOL DISTRICT
UNIFORM COMPLAINT PROCEDURES
COMPLAINT FORM
(Board Policy No. 1312, Administrative Regulation No. 1312.3)

California Code of Regulations, Title 5, Sections 4600-4687 provides guidelines for the filing of Uniform Complaints. A Uniform Complaint Procedure (UCP) or UCP complaint is a written statement alleging discrimination, harassment, intimidation, bullying, or a violation of a Federal or State law or regulation within the following programs:

Programs in UCP Scope:	Federal/State Consolidated Categorical Aid Programs in UCP Scope:
Adult Education Career/Technical Education Child Development Consolidated Categorical Aid Migrant and Indian Education Nutrition Services Special Education Discrimination Harassment Civil Rights Guarantees School Fees	No Child Left Behind (NCLB) – Tile I, Title II, Title III, Title IV Economic Impact Aid – State Compensatory Education (EIA-SCE) Economic Impact Aid – Limited English Proficiency (EIA-LEP) Peer Assistance and Review (PAR) School Improvement Program (SIP) School Safety and Violence Prevention Act Tenth-Grade Counseling Tobacco-Use Prevention Education (TUPE)

I have read the Vista Unified School District's Board Policy on Uniform Complaint Procedures, BP 1312, BP 1312.3 and wish to file a complaint regarding discrimination, harassment, intimidation, bullying, or a violation of Federal or State law as described above.

NATURE OF COMPLAINT

Describe below the nature of the alleged violation. Indicate whether this complaint deals with discrimination, harassment or a violation of a Federal or State Law. If this complaint involves the education service provided to a specific pupil, please give the name, grade, and school of enrollment. Attach additional pages if necessary.

Violation: (Please mark accordingly)

- ☐ Discrimination
- ☐ Harassment
- ☐ Intimidation
- ☐ Bullying
- ☐ Violation of a Federal or State Law regarding the programs above. (Please identify the program involved in the complaint if applicable)

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Child Name _____ Grade _____School of Enrollment_____

Date of Violation: _____
Must be within 6 months of today's date

Filed by: _____ Date Filed: _____

Address of Complainant: _____

Telephone #_____ Email: _____

Received by: _____ Date: _____

Title: _____