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State of Rhode Island

# DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

255 Westminster Street

Providence, Rhode Island 02903-3400

Angélica Infante-Green
 Commissioner

**General Education Dispute Resolution Complaint Form**

*This form assists you with providing the information needed for appealing any dispute arising under a law relating to schools or education to the State Commissioner of Elementary and Secondary Education. This form is to be used only for appeals of general education matters; if you are appealing any matter relating to special education you should contact the RIDE OSCAS Special Education Call Center at 401- 222-8999 or* *RIDECallCenter@ride.ri.gov**.*

*Before submitting this form, please be sure that you have exhausted all available remedies at the local level. Additional information regarding appeals of general education matters to the State Commissioner of Elementary and Secondary Education is available at:* [*https://ride.ri.gov/inside-ride/legal-support*](https://ride.ri.gov/inside-ride/legal-support)*.*

**Student Information**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Grade Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School of Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District of Residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Complainant Information**

Complainant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different than student): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of the Issues**

*Please describe the problem(s) and your concern(s), including as much detail as possible. Include all information that you believe to be important. You may attach any additional documents that you believe would support your claim(s).*

Please describe your concern(s), stating the specific facts on which your claim is based.

Describe what steps you have taken to resolve your concern(s) at the local level. Please include the names of any school district representatives that you have contacted.

Please state your preferred resolution, or what actions the school may take that you believe would resolve your concern(s).

**Complainant’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*You may submit your completed complaint form using the below contact information:*

Mail: Angélica Infante-Green, Commissioner

 Attn: Legal Office

Rhode Island Department of Education

255 Westminster Street, Fourth Floor

Providence, RI 02903

Fax: 401-222-4691

Email: Legal@ride.ri.gov

*If you have any questions about this form or your complaint, please contact the RIDE Legal Office at 401-222-8979 or* *legal@ride.ri.gov**.*