



Parent information (All information is required). PLEASE PRINT or type in the fillable fields.

Program Enrolled: _____ Infant/Toddler _____ Pre-School _____ School-Age

1. Please describe the decision or circumstances causing your complaint (give specific factual details)
2. What was the date of the decision or circumstances causing your complaint?
3. Please explain in detail how you have been harmed by this decision or circumstance?

4. Please explain in detail how the IPCDC handbook was violated, misinterpreted or was misapplied.
5. Please describe any efforts you have made to resolve your concerns and the responses to your efforts.
6. With whom did you communicate?
7. On what date?
8. Please describe the outcome or remedy you seek for this complaint.
9. If you are making complaints or charges against any specific individuals, please identify each of those individuals by name and title.

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be re-filed with all the required information if the re-filing is within the designated time for filing a complaint. Attach to this form any documents you believe will support the complaint.

Parent signature

Print name

Date of Filing