# C:\Users\jfk34725\Downloads\VDOE-Interim-Blue.pngVirginia Department of Education

**Complaint Form for Equitable Services to Private School Students and Teachers**

**Elementary and Secondary Education Act**

This form should be used when a private non-profit school and a public Local Education Agency (LEA) fail to reach agreement on a specific issue dealing with the provision of equitable services for eligible private school students, teachers, and/or parents under applicable federal Elementary and Secondary Education Act (ESEA) programs (ESEA Sec. 1117; 8501)

Before any party files a complaint, all parties must have made reasonable efforts to resolve the dispute themselves. Only after these efforts have been made should a complaint be filed by submitting this form to the Virginia Department of Education’s Ombudsman at [Equitable.Services@doe.virginia.gov](mailto:Equitable.Services@doe.virginia.gov).

**Section I: Contact Information**

Name of person filing complaint:

Title/Position of person filing complaint:

Name(s) of private school(s):

Street address(es) of private school(s):

Email of person filing complaint:

Phone number of person filing complaint:

**Section 2: Local Educational Agency (LEA) Information**

Name of LEA complaint is against:

Street address of LEA:

Contact name of LEA representative:

Email of LEA representative:

Phone number of LEA representative:

**Section 3: Covered Programs**

Indicate which program(s) or specific titles for which the complaint is being made:

Title I and VIII programs (ESEA sections 1117 and 8501):

* Title I, Part A – Improving Basic Programs Operated by LEAs
* Title I, Part C – Education of Migratory Children
* Title II, Part A – Supporting Effective Instruction
* Title III, Part A – English Language Acquisition, Language Enhancement, and Academic Achievement
* Title IV, Part A – Student Support and Academic Enrichment Grants
* Title IV, Part B – 21st Century Community Learning Centers

**Section 4: Basis of Complaint**

1. What federal statutory or regulatory requirements that apply to equitable services do you feel have been violated? (Please attach any supporting documentation.)

1. Please describe the issue(s), including dates and any steps you have taken and people you have contacted from the LEA to resolve the issue and their response(s). Please attach any supporting documentation.

1. Please describe the solution or the action you feel would resolve this problem.

1. Are you willing to participate in further discussion with the LEA facilitated by the state Ombudsman to try to resolve your concerns?

**Section 5: Signature**

Typing your name serves as your electronic signature.

Signature:

Date:

Submit the completed and signed form to the Virginia Department of Education at the address below and provide a copy to the LEA. In lieu of mailing the form, it may be emailed to the Virginia Department of Education Ombudsman at [Equitable.Services@doe.virginia.gov](mailto:Equitable.Services@doe.virginia.gov) and submitted electronically via email to the LEA representative.

**Virginia Department of Education   
Office of ESEA Programs   
P.O. Box 2120  
Richmond, Virginia  
23219**