# AEDY Complaint Information For Parents/Guardians

## Dear (Parent/Guardian/Complainant):

## Thank you for contacting the (Local Education Agency (LEA) and AEDY Program) and providing us with the opportunity to assist you in this matter. The following is a process designed to address complaints and concerns regarding any aspect of Alternative Education for Disruptive Youth (AEDY) programs, including placement and exiting decisions, the quality of academic instruction, the provision or omission of language assistance services, and services to students with disabilities to include reasonable modifications.

## Individuals having complaints and concerns regarding AEDY are required to seek resolution via the relevant LEA and AEDY Program, rather than elevating concerns to PDE in the first instance. The filing of a complaint does not limit any other rights or remedies under federal and state law.

# Filing an AEDY Complaint with the LEA and AEDY Program

## Any individual or organization may submit a written complaint using the attached AEDY Complaint Form. The form must be completed and sent to the relevant LEA and AEDY Program.

## The complaint must include:

### (1) the facts on which the statement is based;

### (2) all relevant documents and supporting information; and

### (3) a proposed resolution to the problem to the extent known and available to the complainant at the time the complaint is filed.

### (4) the contact information for the complainant. The complainant may provide additional information either orally or in writing at any time during the complaint process. The complainant must provide the preferred method of contact on the AEDY Complaint Form.

## Failure to provide all of the information in the Complaint Form will not result in the complaint being dismissed. LEA and AEDY Programs will work with complainants to ensure that the requested information is as complete as possible.

## The LEA and AEDY Designees in charge of this process shall be impartial and the (LEA and AEDY) Designees will ensure that the handling the investigation is not the subject of the complaint. The Designees may interview any individual who is said to have knowledge of the allegations. As part of the investigation, the Designees may require the AEDY Program or LEA to respond to the allegations and may contact the complainant. The Designees may consider any relevant evidence as part of the investigation and outcome.

## If the Designees conclude an investigation and make a finding of compliance, the Designees will notify the complainant and the relevant AEDY Program and the LEA and take no further action. If the complainant is not satisfied with the decision, the LEA and AEDY Designees may provide the PDE Complaint Process information to the complainant. If the Designees conclude an investigation and make a finding of non-compliance, the Designees will notify the complainant, the LEA as applicable and direct corrective action to address the noncompliance.

## The Designees will make a good faith effort to perform the actions outlined above in accordance with the following timeline: (1) investigate within 45 days of a determination that an investigation is appropriate, and (2) determine compliance or noncompliance within 30 days of the conclusion of an investigation. Depending upon the nature of the allegations and the investigation, the Designees may take additional time for these steps and will notify the complainant if additional time is needed. Regardless of the aforementioned timelines, the Designees will expedite its investigation and corrective action for more serious allegations.

## The Designees will review the actions taken to address any noncompliance. If the Designees determines that the LEA and AEDY Program addressed the noncompliance, the matter will be closed. If the Designees determine that the LEA and AEDY Program failed to address the noncompliance, the Designees will report to the LEA and AEDY Program Administrator for appropriate enforcement action.

## The LEA and AEDY Designees will acknowledge receipt of complaints. To determine the status of a complaint, please feel free to contact (LEA and AEDY Designees) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(phone number). If the parent disagrees with the LEA or AEDY programs conclusions, they may file a complaint with the Pennsylvania Department of Education, Office of Safe Schools.

## 

**Alternative Education for Disruptive Youth Complaint Form**

**LEA/Referring School Entity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/**

**Alternative Education Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## You may make copies of this form, use additional paper, or call/email the LEA and AEDY Program at 412-394-5804 for additional copies.

My preferred method of contact is:

□ By phone (please provide number):

Best time during normal business hours to call:

□ By email (please provide email address):

□ In person at a public facility during normal business hours. The location would probably be a school or Intermediate Unit building to permit duplication of documents.

Are you filing this complaint on behalf of a specific child? ☐ Yes ☐ No Please provide your contact information, relationship to child, and signature. Name:

Address: Phone Number: Home:

Work: Cell:

E-mail:

Relationship to child or children:

□ Parent ☐ Attorney ☐ Advocate ☐ Other Name and Address of the residence of the child:

Child’s school and school district:

Is the child currently in school? ☐ Yes ☐ No If so, where is the child’s current program: School Building:

School District: Charter School: Private Provider:

Complete *only* if the complaint is filed on behalf of a homeless child or youth. Contact Person:

Telephone:

On or about what date did the violation occur? Date:

To clarify my allegations, I would like the **LEA/Referring School Entity and AEDY Program** to interview the following person(s). (Optional)

Name:  
Occupation Title:   
Phone/Email:

Name:  
Occupation Title:   
Phone/Email:

Name:  
Occupation Title:   
Phone/Email:

Name:  
Occupation Title:   
Phone/Email:

Name:  
Occupation Title:   
Phone/Email:

Provide a statement about the violation or issue, which you believe has occurred. Please include a description of the problem.

List the facts that support your statement.

What is your proposed solution to this problem?

Please return the form to:

**LEA/Referring School Entity AND**

**Alternative Education Program**

**Allegheny Intermediate Unit**

475 East Waterfront Drive

Homestead, PA 15120