

Los Angeles Unified School District Uniform Complaint Procedures Form

Last Name _____ First Name _____

Student Name (if applicable) _____ Grade _____ Date of Birth _____

Address _____ Apt./Suite # _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Email Address _____ Date of Alleged Violation(s) _____

School/Office of Alleged Violation(s) _____

For noncompliance allegations, check the program or activity referred to in your complaint if applicable:

<input type="checkbox"/> Adult education	<input type="checkbox"/> After school education & safety	<input type="checkbox"/> Agricultural career technical education	<input type="checkbox"/> American Indian education centers and early program assessments	<input type="checkbox"/> Bilingual education
<input type="checkbox"/> California peer assistance & review programs for teachers	<input type="checkbox"/> Career technical & technical education and career technical; Technical Training (State)	<input type="checkbox"/> Career technical education (Federal)	<input type="checkbox"/> Child care & development	<input type="checkbox"/> Child nutrition
<input type="checkbox"/> Compensatory education	<input type="checkbox"/> Consolidated categorical aid	<input type="checkbox"/> Course periods without educational content	<input type="checkbox"/> Economic impact aid	<input type="checkbox"/> Education of pupils in foster care, homeless, former juvenile court pupils now enrolled in the District, children of military families, migratory pupils and those in newcomer programs
<input type="checkbox"/> Every Student Succeeds Act/No Child Left Behind (Titles I-VII)	<input type="checkbox"/> Local Control & Accountability Plans (LCAP)	<input type="checkbox"/> Migrant education	<input type="checkbox"/> Physical education instructional minutes	<input type="checkbox"/> Pupil fees
<input type="checkbox"/> Reasonable accommodations for a lactating, pregnant and parenting pupils	<input type="checkbox"/> Regional occupational centers and programs	<input type="checkbox"/> School safety plans	<input type="checkbox"/> Special education	<input type="checkbox"/> State preschool
<input type="checkbox"/> Tobacco-Use Prevention Education				

For complaints of unlawful discrimination, harassment, intimidation or bullying (employee-to-student, student-to-student, third party to student, employee-to-third party) filed no later than six months from the date it occurred or when knowledge was obtained that it occurred, check which actual or perceived protected groups upon which the alleged conduct was based:

- Sex
- Gender Identity
- Ethnic Group Identification
- Nationality
- Color
- Association with a person or group with one or more of the actual or perceived groups listed here
- Sexual Orientation
- Gender Expression
- Race or Ethnicity
- National Origin
- Mental or Physical Disability
- Gender
- Ancestry
- Religion
- Immigration Status
- Lactating Student
- Age

For bullying complaints not based on protected groups and other complaints not listed on this form, contact your school Title IX/Bullying Complaint Manager, Site Administrator or Local District Administrator of Operations. For complaints of employee-to-employee discrimination or harassment, contact the District’s Equal Opportunity Section at (213) 241-7685.

Local Districts:

Northeast (818) 252-5400
 East (323) 224-3100

Northwest (818) 654-3600
 West (31) 914-2100

South (310) 354-3400
 Central (213) 241-0126

If you have contacted your school and Local District and still require assistance, referrals or resources, contact the Educational Equity Compliance Office at (213) 241-7682.

- 1. Please give facts about your complaint. Provide details such as the names of those involved, dates, whether witnesses were present, etc., that may be helpful to the complaint investigator.

- 2. Have you attempted to discuss your complaint with any District personnel? If so, with whom and what was the result?

- 3. Provide copies of any written documents that may be relevant or supportive of your complaint.

I have attached supporting documents. Yes___ No___

Signature _____ Date _____

Mail, fax or email your UCP complaint/documents to:

Julie Hall-Panameño, Director
District Title IX Coordinator/Section 504 Coordinator
Educational Equity Compliance Office
Los Angeles Unified School District
333 South Beaudry Avenue, 20th Floor
Los Angeles, CA 90017
Fax: (213) 241-3312
EquityCompliance@lausd.net

For more information, please contact Dr. Joseph Green, UCP Coordinator, at (213) 241-7682.