[*Date*]

To: [*School Principal’s name*]

[*Name of School*]

[*School Address*]

From: [*Parent’s name*]

[*Address*]

Re: [*Name of student*]

Grade [*Grade Leve*l]

DOB: [*Student’s birth date*]

Dear [*School Principal*]:

I am writing to inform you that my child, [*name of student*], is being bullied and harassed at school. My child is a student with a disability. My child has the following disability: [*specify disability*]. I believe that this harassment is based on his/her disability.

(S)he has been harassed by [*name of harasser(s)*]. This has occurred on [*date or approximate period of time*], when [*describe incident(s) in as much detail as possible*].

When this happened [*name of witness(es)*] witnessed it and [*their response*]. My child spoke to [*names of school staff*] about this incident(s) on [*date or approximate period of time*]. Their response was [*describe school staff response*]. I became aware of this incident(s) when [*describe how you were notified*].

This bullying and disability harassment has affected my child’s ability to access education and has resulted in the following negative consequences: [*Describe effects, including physical/emotional injuries or effects, need for medical/psychological treatment, and impact on academic or school activity attendance, participation, and performance*].

As you may know, my child is a student with a disability, who has an Individualized Education Plan (IEP)/504 Plan [*select, if appropriate*]. Federal and State law protect the rights of students with disabilities to be free of bullying and harassment based on disability, which interferes with or denies opportunity to participate in or benefit from education. Furthermore, California law requires School Districts to adopt policies that prohibit discrimination, harassment and bullying, to create a complaint process to receive and investigate complaints of discrimination, harassment and bullying, and to make this policy available to parents and students.

I request to receive a copy of the District’s policy on bullying and harassment. I request that you investigate this issue and resolve it as soon as possible. Please let me know in writing, the results of your investigation, and what steps you have taken to address this problem, and to ensure it does not happen in the future.

I would also like to request a IEP/504 Plan [*choose one, if applicable*] meeting to be held as soon as possible in order to discuss possible accommodations, services, and/or supports in order to address this issue.

Thank you for your prompt attention to this matter.

[*Parent’s Signature*]

[*Date*]

[*Date*]

To: California Department of Education

Sharon Felix-Rochon, Director

Office of Equal Opportunity

1430 N Street, Suite 4206

Sacramento, CA 95814

From: [*Parent’s name*]

[*Parent’s Address*]

Dear Sir or Madam,

I am writing to file a complaint against [*name of school district*] because I feel that my child, [*name of student*] has been wrongfully discriminated against on the basis of his/her disability.

[*Name of student*] is in [*grade level*] at [*name of school*]. (S)he is a student with a disability; (s)he has [*specify disability*]. (S)he has an IEP/504 Plan [*select, if applicable*].

[*Name of student*] has been bullied and harassed because of his/her disability at school. This occurred on [*date or approximate period of time*], when [*describe incident(s) in as much detail as possible*].

When this happened, [name of witness(es)] heard or saw it and [their response]. My child spoke to [name(s) and title(s) of school staff] about these incidents on [date or approximate period of time] and their response was to [describe school staff response]. I became aware of this incident when [describe how you were notified].

I believe that this harassing conduct is based on disability because [*describe the relationship between the harassment and the student’s disability*].

This disability harassment has created a hostile learning environment which has interfered with my child’s ability to access education and has resulted in the following negative consequences: [*Describe effects, including physical/emotional injuries or effects, need for medical/psychological treatment, and impact on academic and/or school activity attendance, participation, and performance*].

On [*date you sent letter to school district*], I filed a written complaint with the school district and I requested that they investigate and resolve the matter as soon as possible. In response, the school district has [*describe school district’s response*]. I believe they have failed in their obligation to protect my child from discrimination and harassment based on disability because, [*describe why their response fails to adequately address disability harassment*].

Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990, and California Education Code sections 200, 201, 220, 234, and 234.1 protect the rights of students with disabilities to be free of discrimination and harassment based on disability, which interferes with or denies opportunity to participate in or benefit from education. Furthermore, under the Individuals with Education Act, disability harassment may result in a failure by a school district to provide Free and Appropriate Public Education.

In order to resolve this complaint, I am asking for the following remedies: [*indicate what you want the school district to do as a result of your complaint, i.e. counseling for student, compensatory services, training on discrimination and disability harassment for staff/students, modifications to the school district’s policies, etc.*].

I have enclosed [*indicate any relevant documents/evidence, including letters and other communications, decisions, etc*].

Please feel free to contact me regarding this complaint. Thank you for your prompt attention to this matter.

Sincerely,

[*Signature*]

[*Date*]

[*Date*]

To: San Francisco Office

Office for Civil Rights

U.S. Department of Education

50 Beale Street, Suite 7200

San Francisco, CA 94105-1813

From: [*Parent’s name*]

[*Parent’s Address*]

Dear Sir or Madam,

I am writing to file a complaint against [*name of school district*] because I feel that my child, [*name of student*], has been wrongfully discriminated against on the basis of his/her disability.

[*Name of student*] is in [grade level] at [name of school]. (S)he is a student with a disability; (s)he has [*specify disability*]. (S)he has an IEP/504 Plan [*select, if applicable*].

[*Name of student*] has been bullied and harassed because of his/her disability at school. This occurred on [*date or approximate period of time*], when [*describe incident(s) in as much detail as possibl*e].

When this happened, [*name of witness(es)*] heard or saw it and [*their response*]. My child spoke to [*name(s) and title(s) of school staff*] about these incidents on [*date or approximate period of time*] and their response was [*describe school staff response*]. I became aware of this incident when [*describe how you were notified*].

I believe that this harassing conduct is based on disability because [*describe the relationship between the harassment and the student’s disability]*.

This disability harassment has created a hostile learning environment which has interfered with my child’s ability to access education and has resulted in the following negative consequences: [*Describe effects, including physical/emotional injuries or effects, need for medical/psychological treatment, and impact on academic and/or school activity attendance, participation, and performance*].

On [*date you sent letter to school district*], I filed a written complaint with the school district and I requested that they investigate and resolve the matter as soon as possible. In response, the school district has [*describe school district’s response*]. I believe they have failed in their obligation to protect my child from discrimination and harassment based on disability because, [*describe why their response fails to adequately address disability harassment*].

Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act of 1990 protect the rights of students with disabilities to be free of discrimination and harassment based on disability, which interferes with or denies opportunity to participate in or benefit from education. Furthermore, under the Individuals with Education Act, disability harassment may result in a failure by a school district to provide Free and Appropriate Public Education.

In order to resolve this complaint, I am asking for the following remedies: [*indicate what you want the school district to do as a result of your complaint, i.e. counseling for student, compensatory services, training on discrimination and disability harassment for staff/students, modifications to the school district’s policies, etc.*].

I have enclosed [*indicate any relevant documents/evidence, including letters and other communications, decisions, etc*].

Please feel free to contact me regarding this complaint. Thank you for your prompt attention to this matter.

Sincerely,

[*Signature*]

[*Date*]