

**Local AEDY Complaint Form
HATBORO-HORSHAM S.D.**

You may make copies of this form, use additional paper, or call/email the HATBORO-HORSHAM S.D. at 215.420.5502 for additional copies. You may also attach copies of relevant documents to this form.

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

Name of Child:

Child's Date of Birth:

Address of Child:

Complainant Information

Name:

Address:

Phone Number:

Home:

Work:

Cell:

E-mail:

Relationship to child or children:

Parent

Attorney

Advocate

Other

School/Program Information

Child's school and school district:

Child's AEDY Program (please include even if the child has not yet attended the program and has only been referred to attend):

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 this Complaint is filed on behalf of a homeless child or youth.

Contact Person:

Telephone:

Complaint Information

On or about what date did the violation occur?

Date:

To clarify my allegations, I would like the School District to interview the following person(s).
(Optional)

Name	Occupation/Title	Phone Number/E-Mail Address

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, if any, is your proposed solution to this problem?

Please return the form to:
HATBORO-HORSHAM S.D.
Attn: Dennis M. Williams, Jr.
899 Horsham Road
Horsham, PA 19044

cc: Dennis M. Williams, Jr.

