



COASTAL PLAINS

EDUCATION

CHARTER HIGH SCHOOL

Complaint Form for Federal Programs under the Every Student Succeeds Act (ESSA)

Please Print:

Name (Complainant):
Mailing Address:
Phone Number (Home): Phone Number (Work): Phone Number (Cell):
Agency/Agencies complaint is being filed against:
Date on which violation occurred:
Statement that the Coastal Plains Education Charter High have violated a requirement of a Federal statute or regulation that applies to an applicable program (include citation to the Federal statute or regulation). (Attach additional sheets if necessary):
The facts on which the statement is based and the specific requirements allegedly violated. (Attach additional sheets if necessary):

Signature of Complainant

Date

Signature of District Personnel

Date